



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

H8448	2
H8449	3
H8450	4
H8451	5
H8452	6
H8453	7
H8454	8
S5196	10
S5197	11
S5198	14
S5199	18
S5200	26
SF2336	27
SF2337	123



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

House File 2435

H-8448

- 1 Amend House File 2435 as follows:
- 2 1. Page 61, after line 23 by inserting:
- 3 <Sec. _____. Section 225B.8, Code Supplement 2011, is
- 4 amended to read as follows:
- 5 **225B.8 Repeal.**
- 6 This chapter is repealed July 1, ~~2012~~ 2013.>
- 7 2. By renumbering as necessary.

HEDDENS of Story

HEATON of Henry



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

House File 2449

H-8449

1 Amend House File 2449 as follows:
2 1. Page 10, before line 30 by inserting:
3 <DIVISION _____
4 PREVENTION OF DISABILITIES POLICY COUNCIL
5 Sec. _____. Section 225B.8, Code Supplement 2011, is
6 amended to read as follows:
7 **225B.8 Repeal.**
8 This chapter is repealed July 1, ~~2012~~ 2013.
9 Sec. _____. EFFECTIVE UPON ENACTMENT. This division
10 of this Act, being deemed of immediate importance,
11 takes effect upon enactment.>
12 2. By renumbering as necessary.

HEDDENS of Story

HEATON of Henry



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

House File 2460

H-8450

- 1 Amend the amendment, H-8443, to House File 2460 as
2 follows:
3 1. Page 2, line 2, after <plan> by inserting <
4 subject to the requirements under subsection 4A if
5 applicable, and>
6 2. Page 2, after line 3 by inserting:
7 <____. Page 14, after line 27 by inserting:
8 <Sec. _____. Section 403.5, Code 2011, is amended by
9 adding the following new subsection:
10 NEW SUBSECTION. 4A. The resolutions of affected
11 taxing entities required to be received under
12 subsection 1, paragraph "b", section 403.19, subsection
13 1, paragraph "d", section 403.19, subsection 10, and
14 section 403.22, subsection 1A, must be received by the
15 municipality no later than fourteen days following
16 the date of the third public hearing on the proposed
17 urban renewal plan, or, if amending a plan pursuant to
18 subsection 5, within fourteen days of the conclusion
19 of the notification and consultation process. If a
20 resolution is not received in that time period, the
21 affected taxing entity is deemed to have approved the
22 proposed plan or project or amendment.>>
23 3. By renumbering as necessary.

SODERBERG of Plymouth

SANDS of Louisa



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate Amendment to
House Amendment to
Senate File 364

H-8451

- 1 Amend the amendment, S-5193, to Senate File 364,
- 2 as amended, passed, and reprinted by the Senate, as
- 3 follows:
- 4 1. Page 1, by striking lines 3 through 17.
- 5 2. Page 1, line 44, after <life.> by inserting
- 6 <"Occupational therapy" includes but is not limited to
- 7 providing assessment, design, fabrication, application,
- 8 and fitting of selected orthotic devices and training
- 9 in the use of prosthetic devices.>
- 10 3. By renumbering as necessary.

S5193.5809.S (1) 84

-1-

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1/1



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

House File 2460

H-8452

- 1 Amend the amendment, H-8443, to House File 2460 as
2 follows:
3 1. Page 2, line 2, after <plan> by inserting <
4 subject to the requirements under subsection 4A if
5 applicable, and>
6 2. Page 2, after line 3 by inserting:
7 <____. Page 14, after line 27 by inserting:
8 <Sec. _____. Section 403.5, Code 2011, is amended by
9 adding the following new subsection:
10 NEW SUBSECTION. 4A. The resolutions of affected
11 taxing entities required to be received under
12 subsection 1, paragraph "b", section 403.19, subsection
13 1, paragraph "d", section 403.19, subsection 10, and
14 section 403.22, subsection 1A, must be received by the
15 municipality no later than fourteen days following
16 the date of the third public hearing on the proposed
17 urban renewal plan, or, if amending a plan pursuant to
18 subsection 5, within fourteen days of the conclusion
19 of the notification and consultation process. If a
20 resolution is not received in that time period, the
21 affected taxing entity is deemed to have disapproved
22 the proposed plan or project or amendment.>>
23 3. By renumbering as necessary.

SODERBERG of Plymouth

SANDS of Louisa



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate Amendment to
House Amendment to
Senate File 466

H-8453

1 Amend the amendment, S-3329, to Senate File 466,
2 as amended, passed, and reprinted by the Senate, as
3 follows:
4 1. Page 2, by striking lines 36 through 41 and
5 inserting:
6 <6. a. A residential contractor violating this
7 section is subject to the penalties and remedies
8 prescribed by this chapter.
9 b. A violation of this section by a residential
10 contractor is an unlawful practice pursuant to section
11 714.16.>
12 2. By renumbering as necessary.

S3329.5812.S (1) 84

-1-

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1/1



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 430

H-8454

1 Amend the amendment, H-8270, to Senate File 430,
2 as amended, passed, and reprinted by the Senate, as
3 follows:
4 1. By striking page 1, line 3, through page 2, line
5 38, and inserting:
6 <____. By striking page 1, line 1, through page 2,
7 line 30, and inserting:
8 <Sec. _____. **NEW SECTION. 23.1 Citation.**
9 This chapter may be cited as the "*Iowa Public*
10 *Information Board Act*".>
11 _____. Page 3, by striking lines 14 through 16.
12 _____. Page 3, by striking lines 19 through 35 and
13 inserting:
14 <1. An Iowa public information board is created
15 consisting of the following seven members appointed by
16 the governor, subject to confirmation by the senate:
17 a. One member representing the Iowa broadcasters
18 association.
19 b. One member representing the Iowa newspaper
20 association.
21 c. One member representing the Iowa freedom of
22 information council.
23 d. One member representing the Iowa league of
24 cities.
25 e. One member representing the Iowa state
26 association of counties.
27 f. One member representing the Iowa association of
28 school boards.
29 g. One public member with demonstrated interest
30 and knowledge about the requirements of chapters 21
31 and 22. The public member shall not have been an
32 employee of a governmental body, a government body,
33 or a member of any entity or employed by a member of
34 any entity identified in paragraphs "a" through "f"
35 during the twelve months preceding the public member's
36 appointment.
37 2. Appointments to the board shall be subject to
38 sections 69.16 and 69.16A.>
39 _____. Page 4, after line 12 by inserting:
40 <8. The board shall be an independent agency.>
41 _____. By striking page 4, line 19, through page 6,
42 line 29, and inserting:
43 <Sec. _____. **NEW SECTION. 23.5 Complaints.**
44 An aggrieved person or any taxpayer to or citizen of
45 this state may file a timely complaint with the board.
46 Sec. _____. **NEW SECTION. 23.6 Board powers and**
47 **duties.**
48 The board shall have all of the following powers and
49 duties:
50 1. Employ an executive director, who shall be an

H8270.5790 (4) 84

-1-

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1/2



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 attorney, to execute its authority.
2 2. Adopt rules pursuant to chapter 17A calculated
3 to implement and interpret the requirements of chapters
4 21 and 22 and to implement any authority delegated to
5 the board.
6 3. Issue board advisory opinions determining the
7 applicability of chapter 21 or 22 to specified fact
8 situations and issue informal advice to any person
9 concerning the applicability of chapters 21 and 22.
10 4. Receive complaints alleging violations of
11 chapter 21 or 22.>
12 _____. Page 7, by striking lines 10 and 11 and
13 inserting <received, advisory opinions issued, and
14 other work performed by the>
15 _____. Page 7, by striking lines 13 through 18.
16 _____. Page 7, by striking lines 25 through 29 and
17 inserting <with the board alleging a violation of
18 chapter 21 or 22.>
19 _____. By striking page 7, line 32, through page 11,
20 line 6, and inserting:
21 <Sec. _____. NEW SECTION. 23.8 Informal assistance.
22 After accepting a complaint, the board shall
23 promptly work with the parties through the executive
24 director to reach an informal, expeditious resolution
25 of the complaint.
26 Sec. _____. NEW SECTION. 23.9 Jurisdiction.
27 The board shall not have jurisdiction over the
28 judicial or legislative branches of state government or
29 any entity, officer, or employee of those branches, or
30 over the governor or the office of the governor.>
31 _____. Page 11, line 11, by striking <2011> and
32 inserting <2012>
33 _____. Page 11, by striking lines 13 and 14 and
34 inserting <contrary, the executive director of the
35 board shall not be hired prior to July 1, 2013.>
36 _____. Page 11, line 15, by striking <2012> and
37 inserting <2013>
38 _____. Page 11, line 23, by striking <2012> and
39 inserting <2013>
40 _____. Title page, by striking lines 1 through 4 and
41 inserting <An Act relating to the creation of the Iowa
42 public information board and including transition and
43 effective date provisions.>>

ROGERS of Black Hawk

H8270.5790 (4) 84

-2-

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2/2



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 364

S-5196

- 1 Amend the amendment, S-5193, to Senate File 364,
2 as amended, passed, and reprinted by the Senate, as
3 follows:
4 1. Page 1, by striking lines 3 through 17.
5 2. Page 1, line 44, after <life.> by inserting
6 <"*Occupational therapy*" includes but is not limited to
7 providing assessment, design, fabrication, application,
8 and fitting of selected orthotic devices and training
9 in the use of prosthetic devices.>
10 3. By renumbering as necessary.

STEVEN SODDERS



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 2336

S-5197

Amend Senate File 2336 as follows:

2 1. Page 77, after line 35 by inserting:

3 <Sec. _____. NEW SECTION. 239B.2C Substance abuse
4 screening.

5 1. For the purposes of this section, unless the
6 context otherwise requires, "*substance abuse screening*
7 *program*" or "*screening program*" means the substance
8 abuse screening program administered pursuant to this
9 section.

10 2. The substance abuse screening program
11 requirements of this section apply to the following
12 applicants for assistance under this chapter:

13 a. Each adult parent, guardian, or specified
14 relative who is included in the applicant family,
15 including both parents of a two-parent family, or
16 an individual who may be exempt from work activity
17 requirements due to the age of the youngest child or
18 who may be exempt from work activity requirements under
19 the PROMISE JOBS program.

20 b. A minor parent who is not required to live
21 with a parent, guardian, or other adult caretaker in
22 accordance with this chapter.

23 3. As a condition of eligibility for an applicant
24 who is subject to this section to participate in the
25 family investment program, the applicant shall, if not
26 otherwise prohibited by state or federal law, agree to
27 participate in the substance abuse screening program.

28 4. The department shall design and implement a
29 substance abuse screening program for applicants who
30 are subject to this section. To the extent authorized
31 under applicable federal requirements, the screening
32 program shall include but is not limited to all of the
33 following elements:

34 a. Random drug testing of a percentage of the
35 applicants. Such testing shall be conducted on an
36 applicant's blood or urine for the presence of a
37 controlled substance. However, if the information
38 available in regard to a specific applicant indicates
39 there is a strong likelihood that the applicant is
40 using a controlled substance, such testing may be
41 required.

42 b. Assure each applicant being drug tested a
43 reasonable degree of dignity while producing and
44 submitting a sample for drug testing, consistent with
45 the department's need to ensure the reliability of the
46 sample.

47 c. The results of the blood or urine testing shall
48 not be admissible in any criminal proceeding without
49 the consent of the person subject to the testing.

50 d. Provision for the cost of the blood or urine

SF2336.5814 (1) 84

-1-

jp/pf

1/3



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 testing under the screening program to be paid by the
2 applicant.

3 e. Provide any applicant who tests positive in a
4 drug test under the screening program with a list of
5 licensed substance abuse treatment programs available
6 in the area in which the applicant resides. Neither
7 the department nor the state is not responsible for
8 providing or paying for substance abuse treatment as
9 part of the screening conducted under this section.

10 f. An applicant with a positive drug test result
11 who is denied assistance under this chapter may
12 reapply for assistance at any time if the individual
13 can document the successful completion of a licensed
14 substance abuse treatment program. An applicant
15 who has met the requirements of this paragraph
16 and reapplies for assistance must also pass a drug
17 test under the screening program in order for the
18 application to be approved. Any drug test conducted
19 while the individual is undergoing substance abuse
20 treatment must meet the requirements for a drug test
21 under the screening program. The cost of any drug
22 testing or substance abuse treatment provided under
23 this subsection shall be the responsibility of the
24 individual being tested or receiving treatment.

25 g. Other design, operation, and standards
26 provisions adopted in rule to ensure the screening
27 program is implemented in a fair and economical manner.

28 5. An adult applicant is not eligible to
29 participate in the family investment program if any of
30 the following is applicable:

31 a. The applicant does not agree to participate in
32 the substance abuse screening program.

33 b. The applicant tests positive in a blood or urine
34 drug test administered under the screening program for
35 the presence of either of the following:

36 (1) A substance listed in schedule I under section
37 124.204.

38 (2) A substance listed in schedule II, III, or
39 IV under chapter 124 that was not prescribed for the
40 applicant or participant.

41 6. If an applicant parent is deemed ineligible for
42 assistance as a result of having a positive test result
43 from a drug test conducted under the screening program,
44 all of the following apply:

45 a. The eligibility of the applicant's dependent
46 child for assistance is not affected.

47 b. An appropriate protective payee shall be
48 designated to receive assistance on behalf of the
49 dependent child. The applicant parent may choose
50 to designate an individual as the protective payee.

SF2336.5814 (1) 84

-2-

jp/pf

2/3



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 The individual designated by the applicant parent
2 as the protective payee must be a specified relative
3 or other immediate family member unless such family
4 member is not available or the family member declines
5 the designation. In which case another individual,
6 approved by the department, shall be designated as the
7 protective payee. The individual must also participate
8 in the screening program before being approved to be
9 the protective payee. If the designated individual has
10 a positive test result, the designated individual shall
11 be ineligible to be the protective payee.
12 7. The department shall adopt rules to implement
13 this section.>
14 2. By renumbering as necessary.

MARK CHELGREN



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 2334

S-5198

1 Amend Senate File 2334 as follows:

2 1. Page 1, by striking lines 7 through 9 and
3 inserting ~~<2, paragraph "a", moneys in the trust fund~~
4 ~~sufficient to provide for a combined annual fiscal year~~
5 ~~appropriation of three hundred thousand dollars are~~
6 ~~appropriated to the>~~

7 2. Page 1, by striking lines 13 and 14 and
8 inserting ~~<the trust fund. It is the intent of the~~
9 ~~general assembly that the balance in the trust fund~~
10 ~~reach fifty million dollars.>~~

11 3. Page 1, before line 15 by inserting:

12 <Sec. _____. Section 99G.9A, Code 2011, is amended to
13 read as follows:

14 **99G.9A Limited series of lottery games providing aid**
15 **for veterans.**

16 The chief executive officer, in consultation with
17 the board, shall develop and conduct two additional
18 instant scratch and two additional pull tab lottery
19 games annually to provide moneys for the benefit of
20 veterans and their spouses and dependents. The moneys
21 received from the sale of tickets for each lottery
22 game shall be deposited in a special account in the
23 lottery fund. Notwithstanding section 99G.39, after
24 payment of the prizes, the remaining moneys shall be
25 transferred to the veterans trust fund established
26 pursuant to section 35A.13. ~~However, if the balance~~
27 ~~of the veterans trust fund is fifty million dollars or~~
28 ~~more, the remaining moneys shall be appropriated to~~
29 ~~the department of revenue for distribution to county~~
30 ~~directors of veteran affairs, with fifty percent of~~
31 ~~the money to be distributed equally to each county and~~
32 ~~fifty percent of the money to be distributed to each~~
33 ~~county based upon the population of veterans in the~~
34 ~~county, so long as the money distributed to a county~~
35 ~~does not supplant money appropriated by that county for~~
36 ~~the county director of veteran affairs.>~~

37 4. Page 1, before line 22 by inserting:

38 <Sec. _____. TRANSFER TO VETERANS TRUST FUND. At
39 the close of the fiscal year beginning July 1, 2011,
40 following the appropriations made to the cash reserve
41 fund pursuant to section 8.57, subsections 1 and 3, and
42 the Iowa economic emergency fund pursuant to section
43 8.57, subsection 4, and following any transfer made
44 from the Iowa economic emergency fund to the taxpayers
45 trust fund pursuant to section 8.55, subsection 2,
46 paragraph "a", subparagraph (1), from the excess moneys
47 that remain, an amount sufficient for the balance of
48 the veterans trust fund created in section 35A.13
49 to reach fifty million dollars, up to the amount of
50 excess moneys that remains, shall be transferred to the

SF2334.5805 (3) 84

-1-

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1/4



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 veterans trust fund, and any remaining excess shall
2 be transferred to the general fund of the state as
3 provided in section 8.55, subsection 2, paragraph "a",
4 subparagraph (2).>
5 5. Page 1, after line 24 by inserting:
6 <____. The section of this Act amending section
7 99G.9A.>
8 6. Page 1, after line 27 by inserting:
9 <____. The section of this Act transferring moneys
10 to the veterans trust fund created in section 35A.13.>
11 7. Title page, line 1, after <appropriations> by
12 inserting <to the veterans trust fund and>
13 8. By renumbering as necessary.

TIM KAPUCIAN

STEVE KETTERING

PAUL MCKINLEY

BRAD ZAUN

JONI ERNST

ROBERT BACON

MERLIN BARTZ

NANCY J. BOETTGER

JAMES A. SEYMOUR



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

HUBERT HOUSER

JERRY BEHN

SHAWN HAMERLINCK

KENT SORENSON

RICK BERTRAND

BILL ANDERSON

PAT WARD

MARK CHELGREN

DAVID JOHNSON

ROBY SMITH

JAMES F. HAHN

SANDRA H. GREINER

JACK WHITVER



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

BILL DIX

RANDY FEENSTRA



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 2336

S-5199

Amend Senate File 2336 as follows:

- 2 1. Page 1, line 23, by striking <35.00> and
3 inserting <35.00 36.00>
4 2. By striking page 1, line 33, through page 2,
5 line 1, and inserting:
6 <2. The amount appropriated in this section
7 includes additional funding of \$225,000 for delivery of
8 long-term care services to seniors with low or moderate
9 incomes.>
10 3. Page 2, line 32, after <advocate> by inserting
11 <to administer the certified volunteer long-term care
12 resident's advocate program pursuant to section 231.45
13 as enacted in this 2012 Act>
14 4. Page 3, line 18, by striking <26,003,190> and
15 inserting <25,653,190>
16 5. Page 3, line 21, by striking <\$5,753,830> and
17 inserting <\$5,403,830>
18 6. Page 3, line 31, after <(2)> by inserting <(a)>
19 7. Page 3, after line 35 by inserting:
20 <(b) For the fiscal year beginning July 1, 2012,
21 and ending June 30, 2013, the terms of a chapter
22 28D agreement, entered into between the division of
23 tobacco use prevention and control of the department
24 of public health and the alcoholic beverages division
25 of the department of commerce, governing compliance
26 checks conducted to ensure licensed retail tobacco
27 outlet conformity with tobacco laws, regulations, and
28 ordinances relating to persons under eighteen years of
29 age, shall restrict the number of such checks to one
30 check per retail outlet, and one additional check for
31 any retail outlet found to be in violation during the
32 first check.>
33 8. Page 11, line 16, by striking <3,419,028> and
34 inserting <3,919,028>
35 9. Page 12, after line 25 by inserting:
36 <j. For provision of early prevention screening
37 by pap smear and advanced screening by colposcope for
38 women with incomes below 300 percent of the federal
39 poverty level, as defined by the most recently revised
40 poverty income guidelines issued by the United States
41 department of health and human services, who are
42 not covered by a third-party payer health policy or
43 contract that pays for such procedures and related
44 laboratory services:
45 \$ 500,000
46 The department shall distribute the amount
47 appropriated in this lettered paragraph to providers
48 on behalf of eligible persons within the target
49 population.>
50 10. Page 12, line 31, by striking <5,822,987> and

SF2336.5818 (2) 84

-1-

pf/jp

1/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 inserting <5,634,547>
2 11. By striking page 15, line 26, through page 16,
3 line 6, and inserting:
4 <h. (1) Of the funds appropriated in this
5 subsection, \$74,500 shall be used for continued
6 implementation of the recommendations of the direct
7 care worker task force established pursuant to 2005
8 Iowa Acts, chapter 88, based upon the report submitted
9 to the governor and the general assembly in December
10 2006. The department may use a portion of the funds
11 allocated in this lettered paragraph for an additional
12 position to assist in the continued implementation.>
13 12. Page 18, line 10, by striking <2,895,847> and
14 inserting <2,395,847>
15 13. By striking page 18, line 30, through page 19,
16 line 6.
17 14. Page 19, line 12, by striking <2,879,127> and
18 inserting <3,067,567>
19 15. Page 19, after line 29 by inserting:
20 <d. Of the funds appropriated in this subsection,
21 \$337,440 shall be used for the purposes of the board
22 of direct care professionals as established pursuant
23 to the division of this 2012 Act enacting new Code
24 chapter 152F. The direct care worker advisory council
25 established pursuant to 2008 Iowa Acts, chapter 1188,
26 section 69, may continue to provide expertise and
27 leadership relating to the recommendations in the
28 advisory council's final report submitted to the
29 governor and the general assembly in March 2012.>
30 16. Page 32, line 18, by striking <845,251,256> and
31 inserting <845,601,256>
32 17. Page 34, line 11, after <eligibility> by
33 inserting <and premium accounts>
34 18. Page 34, line 25, by striking <are appropriated
35 to and>
36 19. Page 37, line 12, by striking <\$128,940> and
37 inserting <\$141,450>
38 20. Page 41, line 13, after <section.> by inserting
39 <The department may transfer funds appropriated in this
40 section to the appropriation made in this division of
41 this Act for adoption subsidy to support the adjustment
42 in reimbursement rates for specified child welfare
43 providers as provided in this 2012 Act.>
44 21. Page 41, line 15, by striking <\$31,372,177> and
45 inserting <\$31,438,622>
46 22. Page 42, line 19, by striking <\$7,370,116> and
47 inserting <\$7,385,639>
48 23. Page 48, line 6, after <subsidy.> by inserting
49 <The department may transfer funds appropriated in this
50 section to the appropriation made in this division of

SF2336.5818 (2) 84

-2-

pf/jp

2/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 this Act for child and family services to support the
2 adjustment in reimbursement rates for specified child
3 welfare providers as provided in this 2012 Act.>
4 24. Page 53, line 10, by striking <95.90> and
5 inserting <115.50>
6 25. Page 54, line 18, by striking <285.00> and
7 inserting <285.00 295.00>
8 26. Page 55, line 26, by striking <\$237,226,901>
9 and inserting <\$239,726,901>
10 27. Page 55, after line 26 by inserting:
11 <Sec. _____. 2011 Iowa Acts, chapter 129, section
12 141, subsection 1, paragraph a, is amended by adding
13 the following new subparagraph:
14 NEW SUBPARAGRAPH. (1A) For the fiscal year
15 beginning July 1, 2012, and ending June 30, 2013,
16 and within the total state funding amount identified
17 in subparagraph (1), the department shall distribute
18 not more than \$2,500,000 in reimbursement to nursing
19 facilities by adjusting the statewide median of the
20 direct care component of nursing facility costs based
21 upon the most recent cost report submitted by the
22 nursing facility for the period ending on or before
23 December 31, 2011, and inflating these costs forward to
24 July 1, 2012, by using the midpoint of each cost report
25 and applying the skilled nursing facility market basket
26 index. The department shall adjust the reimbursement
27 calculated under this subparagraph as necessary to
28 maintain expenditures of the nursing facility budget
29 within the state funding amount specified in this
30 subparagraph and within the total state funding amount
31 identified in subparagraph (1) for the fiscal year.>
32 28. Page 55, by striking lines 34 and 35 and
33 inserting <single rate of range between \$4.34 per
34 prescription or the pharmacy's usual and customary fee,
35 whichever is lower, and \$11.10 per prescription. The
36 actual dispensing fee set within the range shall be
37 determined by a cost of dispensing survey performed
38 by the department and required to be completed by all
39 medical assistance program participating pharmacies.
40 ~~However,~~>
41 29. Page 56, by striking lines 5 through 14 and
42 inserting:
43 <(2) The department shall implement an average
44 acquisition cost reimbursement methodology for all
45 drugs covered under the medical assistance program.
46 The methodology shall utilize a survey of pharmacy
47 invoices from a rotation of pharmacies in determining
48 the average acquisition cost component of pharmacy
49 reimbursement. Pharmacies and providers that are
50 enrolled in the medical assistance program shall make

SF2336.5818 (2) 84

-3-

pf/jp

3/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 available drug acquisition cost invoice information,
2 product availability information if known, and other
3 information deemed necessary by the department to
4 assist the department in monitoring and revising the
5 reimbursement rates and for efficient operation of
6 the pharmacy benefit. The department shall provide a
7 process for pharmacies to address average acquisition
8 cost prices that are not reflective of the actual cost
9 of a drug.>
10 30. By striking page 57, line 15, through page 58,
11 line 8, and inserting:
12 <PROVIDER REIMBURSEMENT — SPECIFIED CHILD WELFARE
13 PROVIDERS
14 Sec. _____. 2011 Iowa Acts, chapter 129, section 141,
15 is amended by adding the following new subsection:
16 NEW SUBSECTION. 6A. For the fiscal year beginning
17 July 1, 2012, the department shall adjust the
18 foster family basic daily maintenance rate, the
19 maximum adoption subsidy rates for children, the
20 family-centered service providers rate, the family
21 foster care service providers rate, the group foster
22 care service providers rate, and the resource family
23 recruitment and retention contractor rate, as such
24 rates are identified in this section and were in effect
25 on June 30, 2012, in order to distribute an additional
26 \$3,070,512 in state reimbursements equitably to such
27 providers for the fiscal year.>
28 31. Page 62, line 34, by striking <290,000> and
29 inserting <540,000>
30 32. Page 64, line 9, by striking <1,956,245> and
31 inserting <1,956,245 4,106,245>
32 33. Page 66, after line 19 by inserting:
33 <c. For transfer to the department of public health
34 to be used for tobacco use prevention, cessation, and
35 treatment through support of Quitline Iowa:
36 \$ 350,000>
37 34. Page 68, line 22, by striking <2,654,238> and
38 inserting <2,405,936>
39 35. Page 69, line 14, by striking <REDESIGN> and
40 inserting <MEDICAL ASSISTANCE PROGRAM ADDITIONAL
41 FUNDING>
42 36. Page 69, by striking lines 20 through 22 and
43 inserting:
44 <For the medical assistance program appropriation
45 for the fiscal year for the expense of replacing
46 the enhanced match rate provided through the federal
47 American Recovery and Reinvestment Act of 2009 and
48 for the reduction in the federal medical assistance
49 percentage associated with the mental health and
50 disabilities services for which the match has been paid

SF2336.5818 (2) 84

-4-

pf/jp

4/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 by counties:>
2 37. Page 74, after line 6 by inserting:
3 <Sec. _____. NEW SECTION. **8A.441 Medication therapy**
4 **management.**
5 1. As used in this section, unless the context
6 otherwise requires:
7 a. "*Eligible employee*" means an employee of the
8 state, with the exception of an employee of the state
9 board of regents or institutions under the state board
10 of regents, for whom group health plans are established
11 pursuant to chapter 509A providing for third-party
12 payment or prepayment for health or medical expenses.
13 b. "*Medication therapy management*" means a
14 systematic process performed by a licensed pharmacist,
15 designed to improve quality outcomes for patients
16 and lower health care costs, including emergency
17 room, hospital, provider, and other costs, by
18 optimizing appropriate medication use linked directly
19 to achievement of the clinical goals of therapy.
20 Medication therapy management shall include all of the
21 following services:
22 (1) A medication therapy review and in-person
23 consultation relating to all medications, vitamins, and
24 herbal supplements currently being taken by an eligible
25 individual.
26 (2) A medication action plan, subject to the
27 limitations specified in this section, communicated
28 to the individual and the individual's primary care
29 physician or other appropriate prescriber to address
30 issues including appropriateness, effectiveness,
31 safety, drug interactions, and adherence. The
32 medication action plan may include drug therapy
33 recommendations to prescribers that are needed to meet
34 clinical goals and achieve optimal patient outcomes.
35 (3) Documentation and follow-up to ensure
36 consistent levels of pharmacy services and positive
37 outcomes.
38 2. a. The department shall utilize a request for
39 proposals process and shall enter into a contract for
40 the provision of medication therapy management services
41 for eligible employees who meet any of the following
42 criteria:
43 (1) An individual who takes four or more
44 prescription drugs to treat or prevent two or more
45 chronic medical conditions.
46 (2) An individual with a prescription drug therapy
47 problem who is identified by the prescribing physician
48 or other appropriate prescriber, and referred to a
49 pharmacist for medication therapy management services.
50 (3) An individual who meets other criteria

SF2336.5818 (2) 84

-5-

pf/jp

5/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 established by the third-party payment provider
2 contract, policy, or plan.
3 **b.** The contract shall require the entity to provide
4 annual reports to the general assembly detailing
5 the costs, savings, estimated cost avoidance and
6 return on investment, and improved patient outcomes
7 related to the medication therapy management services
8 provided. The entity shall guarantee demonstrated
9 annual savings for overall health care costs, including
10 emergency room, hospital, provider, and other costs,
11 with savings including associated cost avoidance, at
12 least equal to the program's costs with any shortfall
13 amount refunded to the state. The contract shall
14 include terms, conditions, and applicable measurement
15 standards associated with the demonstration of savings.
16 The department shall verify the demonstrated savings
17 reported by the entity were achieved in accordance with
18 the agreed upon measurement standards. The entity
19 shall be prohibited from using the entity's employees
20 to provide the medication therapy management services
21 and shall instead be required to contract with licensed
22 pharmacies, pharmacists, or physicians.
23 **c.** The department may establish an advisory
24 committee comprised of an equal number of physicians
25 and pharmacists to provide advice and oversight in
26 evaluating the results of the program. The department
27 shall appoint the members of the advisory committee
28 based upon designees of the Iowa pharmacy association,
29 the Iowa medical society, and the Iowa osteopathic
30 medical association.
31 **d.** The fees for pharmacist-delivered medication
32 therapy management services shall be separate from
33 the reimbursement for prescription drug product or
34 dispensing services; shall be determined by each
35 third-party payment provider contract, policy, or plan;
36 and must be reasonable based on the resources and time
37 required to provide the service.
38 **e.** A fee shall be established for physician
39 reimbursement for services delivered for medication
40 therapy management as determined by each third-party
41 payment provider contract, policy, or plan, and must be
42 reasonable based on the resources and time required to
43 provide the service.
44 **f.** If any part of the medication therapy management
45 plan developed by a pharmacist incorporates services
46 which are outside the pharmacist's independent scope
47 of practice including the initiation of therapy,
48 modification of dosages, therapeutic interchange, or
49 changes in drug therapy, the express authorization
50 of the individual's physician or other appropriate

SF2336.5818 (2) 84

-6-

pf/jp

6/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 prescriber is required.>
2 38. Page 74, line 16, by striking <annually>
3 39. By striking page 74, line 35, through page 75,
4 line 1, and inserting:
5 <3. The authority shall allocate moneys in the
6 fund to the extent available for the development of
7 supportive housing or the>
8 40. Page 77, after line 35 by inserting:
9 <Sec. _____. NEW SECTION. 249A.17 Reimbursement for
10 providers of outpatient clinical services for children.
11 1. Providers that meet the criteria specified in
12 subsection 2, shall receive cost-based reimbursement
13 for one hundred percent of the reasonable costs, as
14 determined by Medicare reimbursement principles, for
15 provision of outpatient clinical services for children
16 who are recipients of medical assistance.
17 2. In order to be eligible for reimbursement under
18 this section, a provider shall be an accredited,
19 nonprofit agency that meets all of the following
20 criteria:
21 a. Provides clinical outpatient services to
22 children of whom at least sixty percent are recipients
23 of medical assistance.
24 b. Provides at least three children's mental health
25 services including inpatient services, outpatient
26 services, psychiatric and psychological services, and
27 behavioral health intervention services.
28 c. Directly employs a psychiatrist, psychologist,
29 and licensed therapist.>
30 41. Page 79, after line 12 by inserting:
31 <Sec. _____. COST-BASED REIMBURSEMENT — PROVIDERS OF
32 CHILDREN'S OUTPATIENT CLINICAL SERVICES.
33 1. The department of human services shall seek
34 federal approval to amend the medical assistance
35 program state plan and shall amend the contract
36 with the department's managed care contractor for
37 behavioral health services under the medical assistance
38 program to provide medical assistance reimbursement to
39 providers that meet the criteria specified in section
40 249A.17, as enacted in this division of this Act, at
41 100 percent of the reasonable costs for recipients of
42 medical assistance for outpatient clinical services for
43 children.
44 2. Implementation of section 249A.17, as enacted
45 in this division of this Act, is contingent upon
46 receipt of federal approval and limited to the funding
47 made available through amending the contract with the
48 managed care contractor.
49 3. The department shall adopt rules pursuant to
50 chapter 17A to provide reimbursement for outpatient

SF2336.5818 (2) 84

-7-

pf/jp

7/8



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

1 clinical services for children as described in this
2 section. The rules shall provide that reimbursement
3 shall initially be paid on an interim basis and
4 subsequently adjusted retroactively based on submission
5 of financial and statistical reports as required by the
6 department.>
7 42. Page 79, before line 13 by inserting:
8 <Sec. _____. EFFECTIVE UPON ENACTMENT. The section
9 of this division of this Act enacting section 8A.441,
10 being deemed of immediate importance, takes effect upon
11 enactment.>
12 43. Page 85, after line 4 by inserting:
13 <12. Establish a grace period during which a newly
14 employed individual may provide direct care services
15 before being required to complete the appropriate level
16 of certification under this chapter.>

JACK HATCH



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 2336

S-5200

Amend Senate File 2336 as follows:

- 2 1. Page 77, after line 35 by inserting:
3 <Sec. _____. Section 237.3, Code 2011, is amended by
4 adding the following new subsection:
5 NEW SUBSECTION. 11. The department shall adopt
6 rules to administer a certified foster care respite
7 provider program to provide respite in a licensed
8 foster home. The certified respite provider program
9 shall provide care, supervision, or guidance of a
10 foster child for a period up to twenty-four hours or
11 more when the child is placed with a licensed foster
12 home. The certified foster care respite provider shall
13 be responsible to have liability insurance to provide
14 for any loss or damage arising out of occurrences
15 during the provision of certified foster care respite
16 provider care.
17 Sec. _____. Section 237.13, subsection 4, Code 2011,
18 is amended by adding the following new paragraph:
19 NEW PARAGRAPH. *h.* Any loss or damage arising out
20 of occurrences during the provision of certified foster
21 care respite provider care pursuant to section 237.3,
22 subsection 11.>
23 2. By renumbering as necessary.

STEVE KETTERING

SF2336.5816 (3) 84

-1-

ad/jp

1/1



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 2336 - Introduced

SENATE FILE 2336
BY COMMITTEE ON APPROPRIATIONS

(SUCCESSOR TO SSB 3201)

A BILL FOR

1 An Act relating to appropriations for health and human services
2 and including other related provisions and appropriations,
3 making penalties applicable, and including effective,
4 retroactive, and applicability date provisions.
5 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

TLSB 5118SV (3) 84
pf/jp



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

DIVISION I

DEPARTMENT ON AGING

Section 1. 2011 Iowa Acts, chapter 129, section 113, is amended to read as follows:

SEC. 113. DEPARTMENT ON AGING. There is appropriated from the general fund of the state to the department on aging for the fiscal year beginning July 1, 2012, and ending June 30, 2013, the following amount, or so much thereof as is necessary, to be used for the purposes designated:

For aging programs for the department on aging and area agencies on aging to provide citizens of Iowa who are 60 years of age and older with case management for frail elders, Iowa's aging and disabilities resource center, and other services which may include but are not limited to adult day services, respite care, chore services, information and assistance, and material aid, for information and options counseling for persons with disabilities who are 18 years of age or older, and for salaries, support, administration, maintenance, and miscellaneous purposes, and for not more than the following full-time equivalent positions:

.....	\$	5,151,288
		<u>10,402,577</u>
.....	FTEs	35.00

1. Funds appropriated in this section may be used to supplement federal funds under federal regulations. To receive funds appropriated in this section, a local area agency on aging shall match the funds with moneys from other sources according to rules adopted by the department. Funds appropriated in this section may be used for elderly services not specifically enumerated in this section only if approved by an area agency on aging for provision of the service within the area.

2. The amount appropriated in this section includes additional funding of ~~\$225,000~~ \$450,000 for delivery of long-term care services to seniors with low or moderate

LSB 5118SV (3) 84

-1-

pf/jp

1/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 incomes.

2 3. Of the funds appropriated in this section, ~~\$89,973~~
3 \$179,946 shall be transferred to the department of economic
4 development for the Iowa commission on volunteer services to be
5 used for the retired and senior volunteer program.

6 4. a. The department on aging shall establish and enforce
7 procedures relating to expenditure of state and federal funds
8 by area agencies on aging that require compliance with both
9 state and federal laws, rules, and regulations, including but
10 not limited to all of the following:

11 (1) Requiring that expenditures are incurred only for goods
12 or services received or performed prior to the end of the
13 fiscal period designated for use of the funds.

14 (2) Prohibiting prepayment for goods or services not
15 received or performed prior to the end of the fiscal period
16 designated for use of the funds.

17 (3) Prohibiting the prepayment for goods or services
18 not defined specifically by good or service, time period, or
19 recipient.

20 (4) Prohibiting the establishment of accounts from which
21 future goods or services which are not defined specifically by
22 good or service, time period, or recipient, may be purchased.

23 b. The procedures shall provide that if any funds are
24 expended in a manner that is not in compliance with the
25 procedures and applicable federal and state laws, rules, and
26 regulations, and are subsequently subject to repayment, the
27 area agency on aging expending such funds in contravention of
28 such procedures, laws, rules and regulations, not the state,
29 shall be liable for such repayment.

30 5. Of the funds appropriated in this section, \$100,000
31 shall be used to provide an additional local long-term care
32 resident's advocate. It is the intent of the general assembly
33 that the number of local long-term care resident's advocates
34 as provided in section 231.42 be increased each year until 15
35 local long-term care resident's advocates are available in the



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 state.

2

DIVISION II

3

DEPARTMENT OF PUBLIC HEALTH

4 Sec. 2. 2011 Iowa Acts, chapter 129, section 114, is amended
5 to read as follows:

6 SEC. 114. DEPARTMENT OF PUBLIC HEALTH. There is
7 appropriated from the general fund of the state to the
8 department of public health for the fiscal year beginning July
9 1, 2012, and ending June 30, 2013, the following amounts, or
10 so much thereof as is necessary, to be used for the purposes
11 designated:

12 1. ADDICTIVE DISORDERS

13 For reducing the prevalence of use of tobacco, alcohol, and
14 other drugs, and treating individuals affected by addictive
15 behaviors, including gambling, and for not more than the
16 following full-time equivalent positions:

17	\$ 11,751,595
18	<u>26,003,190</u>
19	FTEs 13.00

20 a. (1) Of the funds appropriated in this subsection,
21 ~~\$1,626,915~~ \$5,753,830 shall be used for the tobacco use
22 prevention and control initiative, including efforts at the
23 state and local levels, as provided in chapter 142A. The
24 commission on tobacco use prevention and control established
25 pursuant to section 142A.3 shall advise the director of
26 public health in prioritizing funding needs and the allocation
27 of moneys appropriated for the programs and activities of
28 the initiative under this subparagraph (1) and shall make
29 recommendations to the director in the development of budget
30 requests relating to the initiative.

31 (2) Of the funds allocated in this paragraph "a", ~~\$226,915~~
32 \$453,830 shall be transferred to the alcoholic beverages
33 division of the department of commerce for enforcement of
34 tobacco laws, regulations, and ordinances in accordance with
35 2011 Iowa Acts, ~~House File 467, as enacted~~ chapter 63.

LSB 5118SV (3) 84

-3-

pf/jp

3/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 b. Of the funds appropriated in this subsection,
2 ~~\$10,124,680~~ \$20,249,360 shall be used for problem gambling and
3 substance abuse prevention, treatment, and recovery services,
4 including a 24-hour helpline, public information resources,
5 professional training, and program evaluation.
6 (1) Of the funds allocated in this paragraph "b", ~~\$8,566,254~~
7 \$17,132,508 shall be used for substance abuse prevention and
8 treatment.
9 (a) Of the funds allocated in this subparagraph (1),
10 ~~\$449,650~~ \$899,300 shall be used for the public purpose of a
11 grant program to provide substance abuse prevention programming
12 for children.
13 (i) Of the funds allocated in this subparagraph division
14 (a), ~~\$213,769~~ \$427,539 shall be used for grant funding for
15 organizations that provide programming for children by
16 utilizing mentors. Programs approved for such grants shall be
17 certified or will be certified within six months of receiving
18 the grant award by the Iowa commission on volunteer services as
19 utilizing the standards for effective practice for mentoring
20 programs.
21 (ii) Of the funds allocated in this subparagraph division
22 (a), ~~\$213,419~~ \$426,839 shall be used for grant funding for
23 organizations that provide programming that includes youth
24 development and leadership. The programs shall also be
25 recognized as being programs that are scientifically based with
26 evidence of their effectiveness in reducing substance abuse in
27 children.
28 (iii) The department of public health shall utilize a
29 request for proposals process to implement the grant program.
30 (iv) All grant recipients shall participate in a program
31 evaluation as a requirement for receiving grant funds.
32 (v) Of the funds allocated in this subparagraph division
33 (a), up to ~~\$22,461~~ \$44,922 may be used to administer substance
34 abuse prevention grants and for program evaluations.
35 (b) Of the funds allocated in this subparagraph (1),

LSB 5118SV (3) 84
pf/jp

4/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 ~~\$136,531~~ \$273,062 shall be used for culturally competent
2 substance abuse treatment pilot projects.

3 (i) The department shall utilize the amount allocated
4 in this subparagraph division (b) for at least three pilot
5 projects to provide culturally competent substance abuse
6 treatment in various areas of the state. Each pilot project
7 shall target a particular ethnic minority population. The
8 populations targeted shall include but are not limited to
9 African American, Asian, and Latino.

10 (ii) The pilot project requirements shall provide for
11 documentation or other means to ensure access to the cultural
12 competence approach used by a pilot project so that such
13 approach can be replicated and improved upon in successor
14 programs.

15 (2) Of the funds allocated in this paragraph "b", up
16 to ~~\$1,558,426~~ \$3,116,852 may be used for problem gambling
17 prevention, treatment, and recovery services.

18 (a) Of the funds allocated in this subparagraph (2),
19 ~~\$1,289,500~~ \$2,579,000 shall be used for problem gambling
20 prevention and treatment.

21 (b) Of the funds allocated in this subparagraph (2), up to
22 ~~\$218,926~~ \$437,852 may be used for a 24-hour helpline, public
23 information resources, professional training, and program
24 evaluation.

25 (c) Of the funds allocated in this subparagraph (2), up
26 to ~~\$50,000~~ \$100,000 may be used for the licensing of problem
27 gambling treatment programs.

28 (3) It is the intent of the general assembly that from the
29 moneys allocated in this paragraph "b", persons with a dual
30 diagnosis of substance abuse and gambling addictions shall be
31 given priority in treatment services.

32 c. Notwithstanding any provision of law to the contrary,
33 to standardize the availability, delivery, cost of delivery,
34 and accountability of problem gambling and substance abuse
35 treatment services statewide, the department shall continue



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 implementation of a process to create a system for delivery
2 of treatment services in accordance with the requirements
3 specified in 2008 Iowa Acts, chapter 1187, section 3,
4 subsection 4. To ensure the system provides a continuum of
5 treatment services that best meets the needs of Iowans, the
6 problem gambling and substance abuse treatment services in any
7 area may be provided either by a single agency or by separate
8 agencies submitting a joint proposal.

9 (1) The system for delivery of substance abuse and problem
10 gambling treatment shall include problem gambling prevention.

11 (2) The system for delivery of substance abuse and problem
12 gambling treatment shall include substance abuse prevention by
13 July 1, 2014.

14 (3) Of the funds allocated in paragraph "b", the department
15 may use up to ~~\$50,000~~ \$100,000 for administrative costs to
16 continue developing and implementing the process in accordance
17 with this paragraph "c".

18 d. The requirement of section 123.53, subsection 5, is met
19 by the appropriations and allocations made in this Act for
20 purposes of substance abuse treatment and addictive disorders
21 for the fiscal year beginning July 1, 2012.

22 e. The department of public health shall work with all other
23 departments that fund substance abuse prevention and treatment
24 services and all such departments shall, to the extent
25 necessary, collectively meet the state maintenance of effort
26 requirements for expenditures for substance abuse services
27 as required under the federal substance abuse prevention and
28 treatment block grant.

29 f. The department shall amend or otherwise revise
30 departmental policies and contract provisions in order to
31 eliminate free t-shirt distribution, banner production, and
32 other unnecessary promotional expenditures.

33 2. HEALTHY CHILDREN AND FAMILIES

34 For promoting the optimum health status for children,
35 adolescents from birth through 21 years of age, and families,

LSB 5118SV (3) 84

-6-

pf/jp

6/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 and for not more than the following full-time equivalent
2 positions:
3 \$ ~~1,297,135~~
4 2,694,270
5 FTEs 10.00

6 a. Of the funds appropriated in this subsection, not
7 more than ~~\$369,659~~ \$739,318 shall be used for the healthy
8 opportunities to experience success (HOPES)-healthy families
9 Iowa (HFI) program established pursuant to section 135.106.
10 The funding shall be distributed to renew the grants that were
11 provided to the grantees that operated the program during the
12 fiscal year ending June 30, 2012.

13 0b. (1) In order to implement the legislative intent
14 stated in sections 135.106 and 256I.9, that priority for
15 home visitation program funding be given to programs using
16 evidence-based or promising models for home visitation, it is
17 the intent of the general assembly to phase-in the funding
18 priority as follows:

19 (a) By July 1, 2013, 25 percent of state funds expended
20 for home visiting programs are for evidence-based or promising
21 program models.

22 (b) By July 1, 2014, 50 percent of state funds expended
23 for home visiting programs are for evidence-based or promising
24 program models.

25 (c) By July 1, 2015, 75 percent of state funds expended
26 for home visiting programs are for evidence-based or promising
27 program models.

28 (d) By July 1, 2016, 90 percent of state funds expended
29 for home visiting programs are for evidence-based or promising
30 program models. The remaining 10 percent of funds may be
31 used for innovative program models that do not yet meet the
32 definition of evidence-based or promising programs.

33 (2) For the purposes of this lettered paragraph, unless the
34 context otherwise requires:

35 (a) "Evidence-based program" means a program that is based

LSB 5118SV (3) 84

-7-

pf/jp

7/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 on scientific evidence demonstrating that the program model
2 is effective. An evidence-based program shall be reviewed
3 onsite and compared to program model standards by the model
4 developer or the developer's designee at least every five years
5 to ensure that the program continues to maintain fidelity
6 with the program model. The program model shall have had
7 demonstrated significant and sustained positive outcomes in an
8 evaluation utilizing a well-designed and rigorous randomized
9 controlled research design or a quasi-experimental research
10 design, and the evaluation results shall have been published in
11 a peer-reviewed journal.

12 (b) "Family support programs" includes group-based parent
13 education or home visiting programs that are designed to
14 strengthen protective factors, including parenting skills,
15 increasing parental knowledge of child development, and
16 increasing family functioning and problem solving skills. A
17 family support program may be used as an early intervention
18 strategy to improve birth outcomes, parental knowledge, family
19 economic success, the home learning environment, family and
20 child involvement with others, and coordination with other
21 community resources. A family support program may have a
22 specific focus on preventing child maltreatment or ensuring
23 children are safe, healthy, and ready to succeed in school.

24 (c) "Promising program" means a program that meets all of
25 the following requirements:

26 (i) The program conforms to a clear, consistent family
27 support model that has been in existence for at least three
28 years.

29 (ii) The program is grounded in relevant empirically-based
30 knowledge.

31 (iii) The program is linked to program-determined outcomes.

32 (iv) The program is associated with a national or state
33 organization that either has comprehensive program standards
34 that ensure high-quality service delivery and continuous
35 program quality improvement or the program model has

LSB 5118SV (3) 84

-8-

pf/jp

8/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 demonstrated through the program's benchmark outcomes that the
2 program has achieved significant positive outcomes equivalent
3 to those achieved by program models with published significant
4 and sustained results in a peer-reviewed journal.

5 (v) The program has been awarded the Iowa family support
6 credential and has been reviewed onsite at least every five
7 years to ensure the program's adherence to the Iowa family
8 support standards approved by the early childhood Iowa
9 state board created in section 256I.3 or a comparable set of
10 standards. The onsite review is completed by an independent
11 review team that is not associated with the program or the
12 organization administering the program.

13 (3) (a) The data reporting requirements applicable to
14 the HOPES-HFI program services shall include the requirements
15 adopted by the early childhood Iowa state board pursuant
16 to section 256I.4 for the family support programs targeted
17 to families expecting a child or with newborn and infant
18 children through age five and funded through the state board.
19 The department of public health may specify additional data
20 reporting requirements for the HOPES-HFI program services. The
21 HOPES-HFI program services shall be required to participate in
22 a state administered internet-based data collection system by
23 July 1, 2013. The annual reporting concerning the HOPES-HFI
24 program services shall include program outcomes beginning with
25 the 2015 report.

26 (b) The data on families served that is collected by the
27 HOPES-HFI program shall include but is not limited to basic
28 demographic information, services received, funding utilized,
29 and program outcomes for the children and families served.

30 (c) The HOPES-HFI program shall work with the early
31 childhood Iowa state board in the state board's efforts
32 to identify minimum competency standards for the employees
33 and supervisors of family support programs funded. The
34 HOPES-HFI program, along with the state board, shall submit
35 recommendations concerning the standards to the governor and



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 general assembly on or before January 1, 2014.

2 (d) On or before January 1, 2013, the HOPES-HFI program
3 shall adopt criminal and child abuse record check requirements
4 for the employees and supervisors of family support programs
5 funded through the program.

6 (e) The HOPES-HFI program shall work with the early
7 childhood Iowa state board in the state board's efforts to
8 develop a plan to implement a coordinated intake and referral
9 process for publicly funded family support programs in order
10 to engage the families expecting a child or with newborn and
11 infant children through age five in all communities in the
12 state by July 1, 2015.

13 b. Of the funds appropriated in this subsection, ~~\$164,942~~
14 ~~\$329,885~~ shall be used to continue to address the healthy
15 mental development of children from birth through five years
16 of age through local evidence-based strategies that engage
17 both the public and private sectors in promoting healthy
18 development, prevention, and treatment for children. The
19 department shall work with the department of human services,
20 Iowa Medicaid enterprise, to develop a plan to secure matching
21 medical assistance program funding to provide services under
22 this paragraph, which may include a per member per month
23 payment to reimburse the care coordination and community
24 outreach services component that links young children and their
25 families with identified service needs.

26 c. Of the funds appropriated in this subsection, ~~\$15,798~~
27 ~~\$31,597~~ shall be distributed to a statewide dental carrier to
28 provide funds to continue the donated dental services program
29 patterned after the projects developed by the lifeline network
30 to provide dental services to indigent elderly and disabled
31 individuals.

32 d. Of the funds appropriated in this subsection, ~~\$56,338~~
33 ~~\$112,677~~ shall be used for childhood obesity prevention.

34 e. Of the funds appropriated in this subsection, ~~\$81,880~~
35 ~~\$163,760~~ shall be used to provide audiological services and

LSB 5118SV (3) 84

-10-

pf/jp

10/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 hearing aids for children. The department may enter into a
2 contract to administer this paragraph.
3 f. Of the funds appropriated in this subsection, \$100,000
4 shall be transferred to the university of Iowa college of
5 dentistry for provision of primary dental services to children.
6 State funds shall be matched on a dollar-for-dollar basis.
7 The university of Iowa college of dentistry shall coordinate
8 efforts with the department of public health, bureau of oral
9 health, to provide dental care to underserved populations
10 throughout the state.

11 3. CHRONIC CONDITIONS

12 For serving individuals identified as having chronic
13 conditions or special health care needs, and for not more than
14 the following full-time equivalent positions:

15	\$	1,680,828
16		<u>3,419,028</u>
17	FTEs	4.00
18		<u>5.00</u>

19 a. Of the funds appropriated in this subsection, ~~\$80,291~~
20 \$160,582 shall be used for grants to individual patients
21 who have phenylketonuria (PKU) to assist with the costs of
22 necessary special foods.

23 b. Of the funds appropriated in this subsection, ~~\$241,800~~
24 \$483,600 is allocated for continuation of the contracts for
25 resource facilitator services in accordance with section
26 135.22B, subsection 9, and for brain injury training services
27 and recruiting of service providers to increase the capacity
28 within this state to address the needs of individuals with
29 brain injuries and such individuals' families.

30 c. Of the funds appropriated in this subsection, ~~\$249,437~~
31 \$550,000 shall be used as additional funding to leverage
32 federal funding through the federal Ryan White Care Act, Tit.
33 II, AIDS drug assistance program supplemental drug treatment
34 grants.

35 d. Of the funds appropriated in this subsection, ~~\$15,627~~

LSB 5118SV (3) 84

-11-

pf/jp

11/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 \$50,000 shall be used for the public purpose of providing
2 a grant to an existing national-affiliated organization to
3 provide education, client-centered programs, and client and
4 family support for people living with epilepsy and their
5 families.

6 e. Of the funds appropriated in this subsection, ~~\$394,151~~
7 \$788,303 shall be used for child health specialty clinics.

8 f. Of the funds appropriated in this subsection, ~~\$248,533~~
9 \$497,065 shall be used for the comprehensive cancer control
10 program to reduce the burden of cancer in Iowa through
11 prevention, early detection, effective treatment, and ensuring
12 quality of life. Of the funds allocated in this lettered
13 paragraph, ~~\$75,000~~ \$150,000 shall be used to support a melanoma
14 research symposium, a melanoma biorepository and registry,
15 basic and translational melanoma research, and clinical trials.

16 g. Of the funds appropriated in this subsection, ~~\$63,225~~
17 \$126,450 shall be used for cervical and colon cancer screening.

18 h. Of the funds appropriated in this subsection, ~~\$264,417~~
19 \$528,834 shall be used for the center for congenital and
20 inherited disorders. The number of full-time equivalent
21 positions authorized in this subsection includes one full-time
22 equivalent position to act as the state genetics coordinator.

23 i. Of the funds appropriated in this subsection, ~~\$64,968~~
24 \$129,937 shall be used for the prescription drug donation
25 repository program created in chapter 135M.

26 4. COMMUNITY CAPACITY

27 For strengthening the health care delivery system at the
28 local level, and for not more than the following full-time
29 equivalent positions:

30	\$	2,117,583
31		<u>5,822,987</u>
32	FTEs	14.00

33 a. Of the funds appropriated in this subsection, ~~\$50,000~~
34 \$100,000 is allocated for a child vision screening program
35 implemented through the university of Iowa hospitals and

LSB 5118SV (3) 84

-12-

pf/jp

12/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 clinics in collaboration with early childhood Iowa areas.
2 b. Of the funds appropriated in this subsection, ~~\$55,654~~
3 \$111,308 is allocated for continuation of an initiative
4 implemented at the university of Iowa and ~~\$50,246~~ \$100,493
5 is allocated for continuation of an initiative at the state
6 mental health institute at Cherokee to expand and improve the
7 workforce engaged in mental health treatment and services.
8 The initiatives shall receive input from the university of
9 Iowa, the department of human services, the department of
10 public health, and the mental health and disability services
11 commission to address the focus of the initiatives.
12 c. Of the funds appropriated in this subsection, ~~\$585,745~~
13 \$1,171,491 shall be used for essential public health services
14 that promote healthy aging throughout the lifespan, contracted
15 through a formula for local boards of health, to enhance health
16 promotion and disease prevention services.
17 d. Of the funds appropriated in this section, ~~\$60,908~~
18 \$121,817 shall be deposited in the governmental public health
19 system fund created in section 135A.8 to be used for the
20 purposes of the fund.
21 e. Of the funds appropriated in this subsection, ~~\$72,271~~
22 \$144,542 shall be used for the mental health professional
23 shortage area program implemented pursuant to section 135.80.
24 f. Of the funds appropriated in this subsection, ~~\$19,131~~
25 \$38,263 shall be used for a grant to a statewide association
26 of psychologists that is affiliated with the American
27 psychological association to be used for continuation of a
28 program to rotate intern psychologists in placements in urban
29 and rural mental health professional shortage areas, as defined
30 in section ~~135.80~~ 135.180.
31 g. Of the funds appropriated in this subsection, the
32 following amounts shall be allocated to the Iowa collaborative
33 safety net provider network established pursuant to section
34 135.153 to be used for the purposes designated. The following
35 amounts allocated under this lettered paragraph shall be

LSB 5118SV (3) 84

-13-

pf/jp

13/95

**Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012**

S.F. 2336

distributed to the specified provider and shall not be reduced for administrative or other costs prior to distribution:

(1) For distribution to the Iowa primary care association for statewide coordination of the Iowa collaborative safety net provider network:

.....	\$	66,290
		<u>150,000</u>

(1A) For distribution to the Iowa primary care association to be used for the following women's health initiatives:

(a) To establish a grant program, in collaboration with sexual assault response teams (SARTs) comprised of representatives of law enforcement, victim advocates, prosecutors, and certified medical personnel to expand the response room model for use by SARTs throughout the state:

.....	\$	50,000
-------	----	--------

(b) To promote access to primary and preventive health care and for provision of assistance to patients in determining an appropriate medical home:

.....	\$	75,000
-------	----	--------

(1B) For distribution to federally qualified health centers for necessary infrastructure, statewide coordination, provider recruitment, service delivery, and provision of assistance to patients in determining an appropriate medical home:

.....	\$	125,000
-------	----	---------

(2) For distribution to the local boards of health that provide direct services for pilot programs in three counties to assist patients in determining an appropriate medical home:

.....	\$	38,804
		<u>77,609</u>

(3) For distribution to maternal and child health centers for pilot programs in three counties to assist patients in determining an appropriate medical home:

.....	\$	38,804
		<u>100,000</u>

(4) For distribution to free clinics for necessary

LSB 5118SV (3) 84

pf/jp

14/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 infrastructure, statewide coordination, provider recruitment,
2 service delivery, and provision of assistance to patients in
3 determining an appropriate medical home:
4 \$ 62,025
5 424,050
6 (5) For distribution to rural health clinics for necessary
7 infrastructure, statewide coordination, provider recruitment,
8 service delivery, and provision of assistance to patients in
9 determining an appropriate medical home:
10 \$ 55,215
11 150,000
12 (6) For continuation of the safety net provider patient
13 access to specialty health care initiative as described in 2007
14 Iowa Acts, chapter 218, section 109:
15 \$ 130,000
16 400,000
17 (7) For continuation of the pharmaceutical infrastructure
18 for safety net providers as described in 2007 Iowa Acts,
19 chapter 218, section 108:
20 \$ 135,000
21 435,000
22 The Iowa collaborative safety net provider network may
23 continue to distribute funds allocated pursuant to this
24 lettered paragraph through existing contracts or renewal of
25 existing contracts.
26 h. ~~(1)~~ Of the funds appropriated in this subsection,
27 ~~\$74,500~~ \$337,440 shall be used for ~~continued implementation~~
28 ~~of the recommendations of the direct care worker task force~~
29 ~~established pursuant to 2005 Iowa Acts, chapter 88, based~~
30 ~~upon the report submitted to the governor and the general~~
31 ~~assembly in December 2006. The department may use a portion~~
32 ~~of the funds allocated in this lettered paragraph for an~~
33 ~~additional position to assist in the continued implementation~~
34 ~~the purposes of the board of direct care professionals as~~
35 ~~established pursuant to the division of this Act enacting new~~

LSB 5118SV (3) 84

-15-

pf/jp

15/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Code chapter 152F. The direct care worker advisory council
2 established pursuant to 2008 Iowa Acts, chapter 1188, section
3 69, may continue to provide expertise and leadership relating
4 to the recommendations in the advisory council's final report
5 submitted to the governor and the general assembly in March
6 2012.

7 i. (1) Of the funds appropriated in this subsection,
8 ~~\$65,050~~ \$145,100 shall be used for allocation to an independent
9 statewide direct care worker association that serves the
10 entirety of the direct care workforce under a contract with
11 terms determined by the director of public health relating
12 to education, outreach, leadership development, mentoring,
13 and other initiatives intended to enhance the recruitment and
14 retention of direct care workers in health care and long-term
15 care settings.

16 (2) Of the funds appropriated in this subsection, ~~\$29,000~~
17 \$58,000 shall be used to provide scholarships or other forms of
18 subsidization for direct care worker educational conferences,
19 training, or outreach activities.

20 j. Of the funds appropriated in this subsection, the
21 department may use up to ~~\$29,259~~ \$58,518 for up to one
22 full-time equivalent position to administer the volunteer
23 health care provider program pursuant to section 135.24.

24 k. Of the funds appropriated in this subsection, ~~\$25,000~~
25 \$50,000 shall be used for a matching dental education loan
26 repayment program to be allocated to a dental nonprofit health
27 service corporation to develop the criteria and implement the
28 loan repayment program.

29 l. Of the funds appropriated in this subsection, \$250,000
30 shall be used as state matching funds for the primary care
31 provider recruitment and retention endeavor established
32 pursuant to section 135.107. Notwithstanding any provision
33 to the contrary including whether a community is located in a
34 federally designated health professional shortage area, the
35 funds shall be used for loans to medical students who upon

LSB 5118SV (3) 84

-16-

pf/jp

16/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 receiving a permanent license in this state will engage in
2 the full-time practice of medicine and surgery or osteopathic
3 medicine and surgery specializing in family medicine,
4 pediatrics, psychiatry, internal medicine, or general surgery
5 in a city within the state with a population of less than
6 26,000 that is located more than 20 miles from a city with a
7 population of 50,000 or more. The department may adopt rules
8 pursuant to chapter 17A to implement this paragraph "l".

9 m. Of the funds appropriated in this subsection, \$100,000
10 shall be used for the purposes of the Iowa donor registry as
11 specified in section 142C.18.

12 n. Of the funds appropriated in this subsection, \$100,000
13 shall be used for continuation of a grant to a nationally
14 affiliated volunteer eye organization that has an established
15 program for children and adults and that is solely dedicated to
16 preserving sight and preventing blindness through education,
17 nationally certified vision screening and training, and
18 community and patient service programs.

19 5. HEALTHY AGING

20 To provide public health services that reduce risks and
21 invest in promoting and protecting good health over the
22 course of a lifetime with a priority given to older Iowans and
23 vulnerable populations:

24 \$ ~~3,648,571~~
25 7,297,142

26 a. Of the funds appropriated in this subsection, ~~\$1,004,593~~
27 \$2,009,187 shall be used for local public health nursing
28 services.

29 b. Of the funds appropriated in this subsection, ~~\$2,643,977~~
30 \$5,287,955 shall be used for home care aide services.

31 6. ENVIRONMENTAL HAZARDS

32 For reducing the public's exposure to hazards in the
33 environment, primarily chemical hazards, and for not more than
34 the following full-time equivalent positions:

35 \$ ~~406,888~~

LSB 5118SV (3) 84

-17-

pf/jp

17/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 813,777
2 FTEs 4.00
3 Of the funds appropriated in this subsection, ~~\$272,188~~
4 \$544,377 shall be used for childhood lead poisoning provisions.
5 7. INFECTIOUS DISEASES
6 a. For reducing the incidence and prevalence of
7 communicable diseases, and for not more than the following
8 full-time equivalent positions:
9 \$ 672,923
10 2,895,847
11 FTEs 4.00
12 b. For the human papillomavirus vaccination public
13 awareness program in accordance with section 135.11, subsection
14 31, as enacted by this Act:
15 \$ 50,000
16 The department of public health may seek private sector
17 moneys for the purpose of supporting the public awareness
18 program.
19 c. For provision of vaccinations for human papillomavirus
20 to persons age 19 through 26 with incomes below 300 percent
21 of the federal poverty level, as defined by the most recently
22 revised poverty income guidelines issued by the United States
23 department of health and human services, who are not covered
24 by a third-party payer health policy or contract that pays for
25 such vaccinations:
26 \$ 1,000,000
27 The department shall distribute the amount appropriated in
28 this lettered paragraph to providers on behalf of eligible
29 persons within the target population.
30 d. For provision of early prevention screening by pap smear
31 and advanced screening by colposcope for women with incomes
32 below 300 percent of the federal poverty level, as defined by
33 the most recently revised poverty income guidelines issued by
34 the United States department of health and human services,
35 who are not covered by a third-party payer health policy or

LSB 5118SV (3) 84

-18-

pf/jp

18/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 contract that pays for such procedures and related laboratory
2 services:

3 \$ 500,000

4 The department shall distribute the amount appropriated in
5 this lettered paragraph to providers on behalf of eligible
6 persons within the target population.

7 8. PUBLIC PROTECTION

8 For protecting the health and safety of the public through
9 establishing standards and enforcing regulations, and for not
10 more than the following full-time equivalent positions:

11 \$ ~~1,388,116~~

12 2,879,127

13 FTEs 125.00

14 a. Of the funds appropriated in this subsection, not more
15 than ~~\$235,845~~ \$471,690 shall be credited to the emergency
16 medical services fund created in section 135.25. Moneys in
17 the emergency medical services fund are appropriated to the
18 department to be used for the purposes of the fund.

19 b. Of the funds appropriated in this subsection, ~~\$105,309~~
20 \$210,619 shall be used for sexual violence prevention
21 programming through a statewide organization representing
22 programs serving victims of sexual violence through the
23 department's sexual violence prevention program. The amount
24 allocated in this lettered paragraph shall not be used to
25 supplant funding administered for other sexual violence
26 prevention or victims assistance programs.

27 c. Of the funds appropriated in this subsection, not more
28 than ~~\$218,291~~ \$539,477 shall be used for the state poison
29 control center.

30 9. RESOURCE MANAGEMENT

31 For establishing and sustaining the overall ability of the
32 department to deliver services to the public, and for not more
33 than the following full-time equivalent positions:

34 \$ ~~409,777~~

35 819,554

LSB 5118SV (3) 84

-19-

pf/jp

19/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 FTEs 7.00

2 The university of Iowa hospitals and clinics under the
3 control of the state board of regents shall not receive
4 indirect costs from the funds appropriated in this section.
5 The university of Iowa hospitals and clinics billings to the
6 department shall be on at least a quarterly basis.

7 DIVISION III

8 DEPARTMENT OF VETERANS AFFAIRS

9 Sec. 3. 2011 Iowa Acts, chapter 129, section 115, is amended
10 to read as follows:

11 SEC. 115. DEPARTMENT OF VETERANS AFFAIRS. There is
12 appropriated from the general fund of the state to the
13 department of veterans affairs for the fiscal year beginning
14 July 1, 2012, and ending June 30, 2013, the following amounts,
15 or so much thereof as is necessary, to be used for the purposes
16 designated:

17 1. DEPARTMENT OF VETERANS AFFAIRS ADMINISTRATION

18 For salaries, support, maintenance, and miscellaneous
19 purposes, including the war orphans educational assistance fund
20 created in section 35.8, and for not more than the following
21 full-time equivalent positions:

22 \$ 499,416
23 1,010,832
24 FTEs 16.34

25 2. IOWA VETERANS HOME

26 For salaries, support, maintenance, and miscellaneous
27 purposes:

28 \$ 4,476,075
29 8,952,151

30 a. The Iowa veterans home billings involving the department
31 of human services shall be submitted to the department on at
32 least a monthly basis.

33 b. If there is a change in the employer of employees
34 providing services at the Iowa veterans home under a collective
35 bargaining agreement, such employees and the agreement shall

LSB 5118SV (3) 84

-20-

pf/jp

20/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 be continued by the successor employer as though there had not
2 been a change in employer.

3 c. Within available resources and in conformance with
4 associated state and federal program eligibility requirements,
5 the Iowa veterans home may implement measures to provide
6 financial assistance to or on behalf of veterans or their
7 spouses who are participating in the community reentry program.

8 d. The Iowa veterans home expenditure report shall be
9 submitted monthly to the legislative services agency.

10 3. STATE EDUCATIONAL ASSISTANCE — CHILDREN OF DECEASED
11 VETERANS

12 For provision of educational assistance pursuant to section
13 35.9:

14 \$ 6,208
15 12,416

16 4. HOME OWNERSHIP ASSISTANCE PROGRAM

17 For transfer to the Iowa finance authority for the
18 continuation of the home ownership assistance program for
19 persons who are or were eligible members of the armed forces of
20 the United States, pursuant to section 16.54:

21 \$ 1,600,000

22 Sec. 4. 2011 Iowa Acts, chapter 129, section 116, is amended
23 to read as follows:

24 SEC. 116. LIMITATION OF COUNTY COMMISSION OF VETERANS
25 AFFAIRS FUND STANDING APPROPRIATIONS. Notwithstanding the
26 standing appropriation in the following designated section for
27 the fiscal year beginning July 1, 2012, and ending June 30,
28 2013, the amounts appropriated from the general fund of the
29 state pursuant to that section for the following designated
30 purposes shall not exceed the following amount:

31 For the county commissions of veterans affairs fund under
32 section 35A.16:

33 \$ 495,000
34 990,000

35 DIVISION IV

LSB 5118SV (3) 84

-21-

pf/jp

21/95

**Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012**

S.F. 2336

DEPARTMENT OF HUMAN SERVICES

2 Sec. 5. 2011 Iowa Acts, chapter 129, section 117, is amended
3 to read as follows:

4 SEC. 117. TEMPORARY ASSISTANCE FOR NEEDY FAMILIES BLOCK
5 GRANT. There is appropriated from the fund created in section
6 8.41 to the department of human services for the fiscal year
7 beginning July 1, 2012, and ending June 30, 2013, from moneys
8 received under the federal temporary assistance for needy
9 families (TANF) block grant pursuant to the federal Personal
10 Responsibility and Work Opportunity Reconciliation Act of 1996,
11 Pub. L. No. 104-193, and successor legislation, and from moneys
12 received under the emergency contingency fund for temporary
13 assistance for needy families state program established
14 pursuant to the federal American Recovery and Reinvestment Act
15 of 2009, Pub. L. No. 111-5 § 2101, and successor legislation,
16 the following amounts, or so much thereof as is necessary, to
17 be used for the purposes designated:

18 1. To be credited to the family investment program account
19 and used for assistance under the family investment program
20 under chapter 239B:

21	\$ 10,750,369
22		19,790,365

23 2. To be credited to the family investment program account
24 and used for the job opportunities and basic skills (JOBS)
25 program and implementing family investment agreements in
26 accordance with chapter 239B:

27	\$ 6,205,764
28	12,411,528

29 3. To be used for the family development and
30 self-sufficiency grant program in accordance with section
31 216A.107;

32	\$ 1,449,490
33	2,898,980

34 Notwithstanding section 8.33, moneys appropriated in this
35 subsection that remain unencumbered or unobligated at the close

LSB 5118SV (3) 84

pf/jp

22/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 of the fiscal year shall not revert but shall remain available
2 for expenditure for the purposes designated until the close of
3 the succeeding fiscal year. However, unless such moneys are
4 encumbered or obligated on or before September 30, 2013, the
5 moneys shall revert.

6 4. For field operations:

7 \$ ~~15,648,116~~
8 31,296,232

9 5. For general administration:

10 \$ ~~1,872,000~~
11 3,744,000

12 6. For state child care assistance:

13 \$ ~~8,191,343~~
14 16,382,687

15 The funds appropriated in this subsection shall be
16 transferred to the child care and development block grant
17 appropriation made pursuant to 2011 Iowa Acts, chapter
18 126, section 32, by the Eighty-fourth General Assembly,
19 2012 Session, for the federal fiscal year beginning October
20 1, 2012, and ending September 30, 2013. Of this amount,
21 ~~\$100,000~~ \$200,000 shall be used for provision of educational
22 opportunities to registered child care home providers in order
23 to improve services and programs offered by this category
24 of providers and to increase the number of providers. The
25 department may contract with institutions of higher education
26 or child care resource and referral centers to provide
27 the educational opportunities. Allowable administrative
28 costs under the contracts shall not exceed 5 percent. The
29 application for a grant shall not exceed two pages in length.

30 7. For distribution to counties for state case services
31 for persons with mental health and illness, an intellectual
32 disability, or a developmental disabilities community services
33 disability in accordance with section 331.440:

34 \$ ~~2,447,026~~
35 4,894,052

LSB 5118SV (3) 84

-23-

pf/jp

23/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 8. For child and family services:
2 \$ ~~16,042,215~~
3 32,084,430
4 9. For child abuse prevention grants:
5 \$ ~~62,500~~
6 125,000
7 10. For pregnancy prevention grants on the condition that
8 family planning services are funded:
9 \$ ~~965,033~~
10 1,930,067
11 Pregnancy prevention grants shall be awarded to programs
12 in existence on or before July 1, 2012, if the programs have
13 demonstrated positive outcomes. Grants shall be awarded to
14 pregnancy prevention programs which are developed after July
15 1, 2012, if the programs are based on existing models that
16 have demonstrated positive outcomes. Grants shall comply with
17 the requirements provided in 1997 Iowa Acts, chapter 208,
18 section 14, subsections 1 and 2, including the requirement that
19 grant programs must emphasize sexual abstinence. Priority in
20 the awarding of grants shall be given to programs that serve
21 areas of the state which demonstrate the highest percentage of
22 unplanned pregnancies of females of childbearing age within the
23 geographic area to be served by the grant.
24 11. For technology needs and other resources necessary
25 to meet federal welfare reform reporting, tracking, and case
26 management requirements:
27 \$ ~~518,593~~
28 1,037,186
29 12. To be credited to the state child care assistance
30 appropriation made in this section to be used for funding of
31 community-based early childhood programs targeted to children
32 from birth through five years of age developed by early
33 childhood Iowa areas as provided in section 256I.11:
34 \$ ~~3,175,000~~
35 6,350,000

LSB 5118SV (3) 84

-24-

pf/jp

24/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 The department shall transfer TANF block grant funding
2 appropriated and allocated in this subsection to the child care
3 and development block grant appropriation in accordance with
4 federal law as necessary to comply with the provisions of this
5 subsection.

6 13. a. Notwithstanding any provision to the contrary,
7 including but not limited to requirements in section 8.41 or
8 provisions in 2011 or 2012 Iowa Acts regarding the receipt
9 and appropriation of federal block grants, federal funds
10 from the ~~emergency contingency fund~~ for temporary assistance
11 for needy families ~~state program established pursuant to the~~
12 ~~federal American Recovery and Reinvestment Act of 2009, Pub.~~
13 ~~L. No. 111-5 § 2101,~~ block grant received by the state during
14 ~~the fiscal year beginning July 1, 2011, and ending June 30,~~
15 ~~2012,~~ not otherwise appropriated in this section and remaining
16 available ~~as of~~ for the fiscal year beginning July 1, 2012, and
17 ~~received by the state during the fiscal year beginning July~~
18 ~~1, 2012, and ending June 30, 2013,~~ are appropriated to the
19 department of human services to the extent as may be necessary
20 to be used in the following priority order: the family
21 investment program for the fiscal year and for state child care
22 assistance program payments for individuals enrolled in the
23 family investment program who are employed. The federal funds
24 appropriated in this paragraph "a" shall be expended only after
25 all other funds appropriated in subsection 1 for the assistance
26 under the family investment program under chapter 239B have
27 been expended.

28 b. The department shall, on a quarterly basis, advise the
29 legislative services agency and department of management of
30 the amount of funds appropriated in this subsection that was
31 expended in the prior quarter.

32 14. Of the amounts appropriated in this section, ~~\$6,481,004~~
33 \$12,962,008 for the fiscal year beginning July 1, 2012, shall
34 be transferred to the appropriation of the federal social
35 services block grant made for that fiscal year.



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 15. For continuation of the program allowing the department
2 to maintain categorical eligibility for the food assistance
3 program as required under the section of this division relating
4 to the family investment account:

5 \$ 73,036
6 25,000

7 16. The department may transfer funds allocated in this
8 section to the appropriations made in this division of this Act
9 for general administration and field operations for resources
10 necessary to implement and operate the services referred to in
11 this section and those funded in the appropriation made in this
12 division of this Act for the family investment program from the
13 general fund of the state.

14 Sec. 6. 2011 Iowa Acts, chapter 129, section 118, is amended
15 to read as follows:

16 SEC. 118. FAMILY INVESTMENT PROGRAM ACCOUNT.

17 1. Moneys credited to the family investment program (FIP)
18 account for the fiscal year beginning July 1, 2012, and
19 ending June 30, 2013, shall be used to provide assistance in
20 accordance with chapter 239B.

21 2. The department may use a portion of the moneys credited
22 to the FIP account under this section as necessary for
23 salaries, support, maintenance, and miscellaneous purposes.

24 3. The department may transfer funds allocated in this
25 section to the appropriations in this division of this Act
26 for general administration and field operations for resources
27 necessary to implement and operate the services referred to in
28 this section and those funded in the appropriation made in this
29 division of this Act for the family investment program from the
30 general fund of the state.

31 4. Moneys appropriated in this division of this Act and
32 credited to the FIP account for the fiscal year beginning July
33 1, 2012, and ending June 30, 2013, are allocated as follows:

34 a. To be retained by the department of human services to
35 be used for coordinating with the department of human rights

LSB 5118SV (3) 84

-26-

pf/jp

26/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 to more effectively serve participants in the FIP program and
2 other shared clients and to meet federal reporting requirements
3 under the federal temporary assistance for needy families block
4 grant:

5 \$ ~~10,000~~
6 20,000

7 b. To the department of human rights for staffing,
8 administration, and implementation of the family development
9 and self-sufficiency grant program in accordance with section
10 216A.107:

11 \$ ~~2,671,417~~
12 5,942,834

13 (1) Of the funds allocated for the family development and
14 self-sufficiency grant program in this lettered paragraph,
15 not more than 5 percent of the funds shall be used for the
16 administration of the grant program.

17 (2) The department of human rights may continue to implement
18 the family development and self-sufficiency grant program
19 statewide during fiscal year 2012-2013.

20 c. For the diversion subaccount of the FIP account:

21 \$ ~~849,200~~
22 1,698,400

23 A portion of the moneys allocated for the subaccount may
24 be used for field operations salaries, data management system
25 development, and implementation costs and support deemed
26 necessary by the director of human services in order to
27 administer the FIP diversion program.

28 d. For the food stamp employment and training program:

29 \$ ~~33,294~~
30 66,588

31 (1) The department shall amend the food stamp employment and
32 training state plan in order to maximize to the fullest extent
33 permitted by federal law the use of the 50-50 match provisions
34 for the claiming of allowable federal matching funds from the
35 United States department of agriculture pursuant to the federal

LSB 5118SV (3) 84

-27-

pf/jp

27/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 food stamp employment and training program for providing
2 education, employment, and training services for eligible food
3 assistance program participants, including but not limited to
4 related dependent care and transportation expenses.

5 (2) The department shall continue the categorical federal
6 food assistance program eligibility at 160 percent of the
7 federal poverty level and continue to eliminate the asset test
8 from eligibility requirements, consistent with federal food
9 assistance program requirements. The department shall include
10 as many food assistance households as is allowed by federal
11 law. The eligibility provisions shall conform to all federal
12 requirements including requirements addressing individuals who
13 are incarcerated or otherwise ineligible.

14 e. For the JOBS program:

15 \$ ~~10,117,952~~
16 20,235,905

17 5. Of the child support collections assigned under FIP,
18 an amount equal to the federal share of support collections
19 shall be credited to the child support recovery appropriation
20 made in this division of this Act. Of the remainder of the
21 assigned child support collections received by the child
22 support recovery unit, a portion shall be credited to the FIP
23 account, a portion may be used to increase recoveries, and a
24 portion may be used to sustain cash flow in the child support
25 payments account. If as a consequence of the appropriations
26 and allocations made in this section the resulting amounts
27 are insufficient to sustain cash assistance payments and meet
28 federal maintenance of effort requirements, the department
29 shall seek supplemental funding. If child support collections
30 assigned under FIP are greater than estimated or are otherwise
31 determined not to be required for maintenance of effort, the
32 state share of either amount may be transferred to or retained
33 in the child support payment account.

34 6. The department may adopt emergency rules for the family
35 investment, JOBS, food stamp, and medical assistance programs

LSB 5118SV (3) 84

-28-

pf/jp

28/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 if necessary to comply with federal requirements.

2 Sec. 7. 2011 Iowa Acts, chapter 129, section 119, is amended
3 to read as follows:

4 SEC. 119. FAMILY INVESTMENT PROGRAM GENERAL FUND. There
5 is appropriated from the general fund of the state to the
6 department of human services for the fiscal year beginning July
7 1, 2012, and ending June 30, 2013, the following amount, or
8 so much thereof as is necessary, to be used for the purpose
9 designated:

10 To be credited to the family investment program (FIP)
11 account and used for family investment program assistance under
12 chapter 239B:

13 \$ ~~25,085,513~~
14 50,742,028

15 1. Of the funds appropriated in this section, ~~\$3,912,188~~
16 \$7,824,377 is allocated for the JOBS program.

17 2. Of the funds appropriated in this section, ~~\$1,231,927~~
18 \$3,063,854 is allocated for the family development and
19 self-sufficiency grant program.

20 3. Notwithstanding section 8.39, for the fiscal year
21 beginning July 1, 2012, if necessary to meet federal
22 maintenance of effort requirements or to transfer federal
23 temporary assistance for needy families block grant funding
24 to be used for purposes of the federal social services block
25 grant or to meet cash flow needs resulting from delays in
26 receiving federal funding or to implement, in accordance with
27 this division of this Act, activities currently funded with
28 juvenile court services, county, or community moneys and state
29 moneys used in combination with such moneys, the department
30 of human services may transfer funds within or between any
31 of the appropriations made in this division of this Act and
32 appropriations in law for the federal social services block
33 grant to the department for the following purposes, provided
34 that the combined amount of state and federal temporary
35 assistance for needy families block grant funding for each

LSB 5118SV (3) 84

-29-

pf/jp

29/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 appropriation remains the same before and after the transfer:

2 a. For the family investment program.

3 b. For child care assistance.

4 c. For child and family services.

5 d. For field operations.

6 e. For general administration.

7 f. ~~MH/MR/DD/BI community services (local purchase).~~

8 For distribution to counties for state case services for

9 persons with mental illness, an intellectual disability, or a

10 developmental disability in accordance with section 331.440.

11 This subsection shall not be construed to prohibit the use

12 of existing state transfer authority for other purposes. The

13 department shall report any transfers made pursuant to this

14 subsection to the legislative services agency.

15 4. Of the funds appropriated in this section, ~~\$97,839~~

16 \$195,678 shall be used for continuation of a grant to an

17 Iowa-based nonprofit organization with a history of providing

18 tax preparation assistance to low-income Iowans in order to

19 expand the usage of the earned income tax credit. The purpose

20 of the grant is to supply this assistance to underserved areas

21 of the state.

22 4A. Of the funds appropriated in this section, \$500,000

23 shall be used for distribution to a nonprofit, tax-exempt

24 association that receives donations under section 170 of the

25 Internal Revenue Code and whose members include Iowa food

26 banks and their affiliates that together serve all counties

27 in the state, to be used to purchase food for distribution to

28 food-insecure Iowans:

29 \$ 500,000

30 In purchasing food under this subsection, a preference

31 shall be given to the purchase of food produced, processed, or

32 packaged within this state whenever reasonably practicable.

33 5. The department may transfer funds appropriated in this

34 section to the appropriations made in this division of this Act

35 for general administration and field operations as necessary

LSB 5118SV (3) 84

-30-

pf/jp

30/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 to administer this section and the overall family investment
2 program.

3 Sec. 8. 2011 Iowa Acts, chapter 129, section 120, is amended
4 to read as follows:

5 SEC. 120. CHILD SUPPORT RECOVERY. There is appropriated
6 from the general fund of the state to the department of human
7 services for the fiscal year beginning July 1, 2012, and ending
8 June 30, 2013, the following amount, or so much thereof as is
9 necessary, to be used for the purposes designated:

10 For child support recovery, including salaries, support,
11 maintenance, and miscellaneous purposes, and for not more than
12 the following full-time equivalent positions:

13	\$	6,559,627
14		<u>13,377,993</u>
15	FTEs	475.00

16 1. The department shall expend up to ~~\$12,164~~ \$24,329,
17 including federal financial participation, for the fiscal year
18 beginning July 1, 2012, for a child support public awareness
19 campaign. The department and the office of the attorney
20 general shall cooperate in continuation of the campaign. The
21 public awareness campaign shall emphasize, through a variety
22 of media activities, the importance of maximum involvement of
23 both parents in the lives of their children as well as the
24 importance of payment of child support obligations.

25 2. Federal access and visitation grant moneys shall be
26 issued directly to private not-for-profit agencies that provide
27 services designed to increase compliance with the child access
28 provisions of court orders, including but not limited to
29 neutral visitation sites and mediation services.

30 3. The appropriation made to the department for child
31 support recovery may be used throughout the fiscal year in the
32 manner necessary for purposes of cash flow management, and for
33 cash flow management purposes the department may temporarily
34 draw more than the amount appropriated, provided the amount
35 appropriated is not exceeded at the close of the fiscal year.

LSB 5118SV (3) 84

-31-

pf/jp

31/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 4. With the exception of the funding amount specified, the
2 requirements established under 2001 Iowa Acts, chapter 191,
3 section 3, subsection 5, paragraph "c", subparagraph (3), shall
4 be applicable to parental obligation pilot projects for the
5 fiscal year beginning July 1, 2012, and ending June 30, 2013.
6 Notwithstanding 441 IAC 100.8, providing for termination of
7 rules relating to the pilot projects, the rules shall remain
8 in effect until June 30, 2013.

9 Sec. 9. 2011 Iowa Acts, chapter 129, section 121, is amended
10 to read as follows:

11 SEC. 121. HEALTH CARE TRUST FUND — MEDICAL ASSISTANCE. Any
12 funds remaining in the health care trust fund created in
13 section 453A.35A for the fiscal year beginning July 1, 2012,
14 and ending June 30, 2013, are appropriated to the department
15 of human services to supplement the medical assistance program
16 appropriations made in this Act, for medical assistance
17 reimbursement and associated costs, including program
18 administration and costs associated with implementation.

19 MEDICAL ASSISTANCE PROGRAM

20 Sec. 10. 2011 Iowa Acts, chapter 129, section 122,
21 unnumbered paragraph 2, is amended to read as follows:

22 For medical assistance program reimbursement and associated
23 costs as specifically provided in the reimbursement
24 methodologies in effect on June 30, 2012, except as otherwise
25 expressly authorized by law, and consistent with options under
26 federal law and regulations:

27 ~~\$914,993,421~~
28 845,251,256

29 MEDICAL ASSISTANCE — DISPROPORTIONATE SHARE HOSPITAL

30 Sec. 11. 2011 Iowa Acts, chapter 129, section 122,
31 subsection 11, paragraph a, unnumbered paragraph 1, is amended
32 to read as follows:

33 Of the funds appropriated in this section, ~~\$7,425,684~~
34 \$7,678,245 is allocated for the state match for a
35 disproportionate share hospital payment of \$19,133,430 to

LSB 5118SV (3) 84

-32-

pf/jp

32/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 hospitals that meet both of the conditions specified in
2 subparagraphs (1) and (2). In addition, the hospitals that
3 meet the conditions specified shall either certify public
4 expenditures or transfer to the medical assistance program
5 an amount equal to provide the nonfederal share for a
6 disproportionate share hospital payment of \$7,500,000. The
7 hospitals that meet the conditions specified shall receive and
8 retain 100 percent of the total disproportionate share hospital
9 payment of \$26,633,430.

10 MEDICAL ASSISTANCE — IOWACARE TRANSFER

11 Sec. 12. 2011 Iowa Acts, chapter 129, section 122,
12 subsection 13, is amended to read as follows:

13 13. Of the funds appropriated in this section, up to
14 ~~\$4,480,304~~ \$8,684,329 may be transferred to the IowaCare
15 account created in section 249J.24.

16 MEDICAL ASSISTANCE — COST CONTAINMENT STRATEGIES

17 Sec. 13. 2011 Iowa Acts, chapter 129, section 122,
18 subsection 20, paragraphs a and d, are amended to read as
19 follows:

20 a. The department may continue to implement cost
21 containment strategies recommended by the governor, ~~and for~~
22 the fiscal year beginning July 1, 2011, and shall implement
23 new strategies for the fiscal year beginning July 1, 2012, as
24 specified in this division of this 2012 Act. The department
25 may adopt emergency rules for such implementation.

26 d. If the savings to the medical assistance program for
27 the fiscal year beginning July 1, 2012, exceed the cost, the
28 department may transfer any savings generated for the fiscal
29 year due to medical assistance program cost containment efforts
30 initiated pursuant to 2010 Iowa Acts, chapter 1031, Executive
31 Order No. 20, issued December 16, 2009, or cost containment
32 strategies initiated pursuant to this subsection, to the
33 appropriation made in this division of this Act for medical
34 contracts or general administration to defray the increased
35 contract costs associated with implementing such efforts.

LSB 5118SV (3) 84

-33-

pf/jp

33/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Sec. 14. 2011 Iowa Acts, chapter 129, section 122, is
2 amended by adding the following new subsections:

3 NEW SUBSECTION. 23. The department shall implement a
4 hospital inpatient reimbursement policy to provide for the
5 combining of an original claim for an inpatient stay with a
6 claim for a subsequent inpatient stay when the patient is
7 admitted within seven days of discharge from the original
8 hospital stay for the same condition.

9 NEW SUBSECTION. 24. The department shall transition
10 payment for and administration of services provided by
11 psychiatric medical institutions for children to the Iowa plan.

12 MEDICAL ASSISTANCE FOR EMPLOYED PEOPLE WITH DISABILITIES

13 Sec. 15. 2011 Iowa Acts, chapter 129, section 122, is
14 amended by adding the following new subsection:

15 NEW SUBSECTION. 25. The department of human services
16 shall adopt rules for the Medicaid for employed people with
17 disabilities program to provide that until such time as
18 the department adopts rules, annually, to implement the
19 most recently revised poverty guidelines published by the
20 United States department of health and human services, the
21 calculation of gross income eligibility shall not include any
22 increase in unearned income attributable to a social security
23 cost-of-living adjustment for an individual or member of the
24 individual's family whose unearned income is included in such
25 calculation.

26 STATE BALANCING INCENTIVE PAYMENTS PROGRAM

27 Sec. 16. 2011 Iowa Acts, chapter 129, section 122, is
28 amended by adding the following new subsection:

29 NEW SUBSECTION. 27. The funds received through
30 participation in the medical assistance state balancing
31 incentive payments program created pursuant to section 10202
32 of the federal Patient Protection and Affordable Care Act of
33 2010, Pub. L. No. 111-148 (2010), as amended by the federal
34 Health Care and Education Reconciliation Act of 2010, Pub.
35 L. No. 111-152, are appropriated to and shall be used by the

LSB 5118SV (3) 84

-34-

pf/jp

34/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 department of human services to comply with the requirements
2 of the program including developing a no wrong door single
3 entry point system; providing a conflict-free case management
4 system; providing core standardized assessment instruments;
5 complying with data collection requirements relating to
6 services, quality, and outcomes; meeting the applicable target
7 spending percentage required under the program to rebalance
8 long-term care spending under the medical assistance program
9 between home and community-based services and institution-based
10 services; and for new or expanded medical assistance program
11 non-institutionally based long-term care services and supports.

12 Sec. 17. 2011 Iowa Acts, chapter 129, section 123, is
13 amended to read as follows:

14 SEC. 123. MEDICAL CONTRACTS. There is appropriated from the
15 general fund of the state to the department of human services
16 for the fiscal year beginning July 1, 2012, and ending June 30,
17 2013, the following amount, or so much thereof as is necessary,
18 to be used for the purpose designated:

19 For medical contracts:

20	\$ 5,453,728
21	<u>8,460,680</u>

22 1. The department of inspections and appeals shall
23 provide all state matching funds for survey and certification
24 activities performed by the department of inspections
25 and appeals. The department of human services is solely
26 responsible for distributing the federal matching funds for
27 such activities.

28 2. Of the funds appropriated in this section, ~~\$25,000~~
29 \$50,000 shall be used for continuation of home and
30 community-based services waiver quality assurance programs,
31 including the review and streamlining of processes and policies
32 related to oversight and quality management to meet state and
33 federal requirements.

34 3. Of the amount appropriated in this section, up to
35 \$200,000 may be transferred to the appropriation for general

LSB 5118SV (3) 84

-35-

pf/jp

35/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 administration in this division of this Act to be used for
2 additional full-time equivalent positions in the development of
3 key health initiatives such as cost containment, development
4 and oversight of managed care programs, and development of
5 health strategies targeted toward improved quality and reduced
6 costs in the Medicaid program.

7 Sec. 18. 2011 Iowa Acts, chapter 129, section 124, is
8 amended to read as follows:

9 SEC. 124. STATE SUPPLEMENTARY ASSISTANCE.

10 1. There is appropriated from the general fund of the
11 state to the department of human services for the fiscal year
12 beginning July 1, 2012, and ending June 30, 2013, the following
13 amount, or so much thereof as is necessary, to be used for the
14 purpose designated:

15 For the state supplementary assistance program:

16 \$ ~~8,425,373~~
17 15,450,747

18 2. The department shall increase the personal needs
19 allowance for residents of residential care facilities by the
20 same percentage and at the same time as federal supplemental
21 security income and federal social security benefits are
22 increased due to a recognized increase in the cost of living.
23 The department may adopt emergency rules to implement this
24 subsection.

25 3. If during the fiscal year beginning July 1, 2012,
26 the department projects that state supplementary assistance
27 expenditures for a calendar year will not meet the federal
28 pass-through requirement specified in Tit. XVI of the federal
29 Social Security Act, section 1618, as codified in 42 U.S.C.
30 § 1382g, the department may take actions including but not
31 limited to increasing the personal needs allowance for
32 residential care facility residents and making programmatic
33 adjustments or upward adjustments of the residential care
34 facility or in-home health-related care reimbursement rates
35 prescribed in this division of this Act to ensure that federal

LSB 5118SV (3) 84

-36-

pf/jp

36/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 requirements are met. In addition, the department may make
2 other programmatic and rate adjustments necessary to remain
3 within the amount appropriated in this section while ensuring
4 compliance with federal requirements. The department may adopt
5 emergency rules to implement the provisions of this subsection.

6 Sec. 19. 2011 Iowa Acts, chapter 129, section 125, is
7 amended to read as follows:

8 SEC. 125. CHILDREN'S HEALTH INSURANCE PROGRAM.

9 1. There is appropriated from the general fund of the
10 state to the department of human services for the fiscal year
11 beginning July 1, 2012, and ending June 30, 2013, the following
12 amount, or so much thereof as is necessary, to be used for the
13 purpose designated:

14 For maintenance of the healthy and well kids in Iowa (hawk-i)
15 program pursuant to chapter 514I, including supplemental dental
16 services, for receipt of federal financial participation under
17 Tit. XXI of the federal Social Security Act, which creates the
18 children's health insurance program:

19 \$ ~~16,403,051~~
20 40,400,160

21 2. Of the funds appropriated in this section, ~~\$64,475~~
22 \$128,950 is allocated for continuation of the contract for
23 outreach with the department of public health.

24 Sec. 20. 2011 Iowa Acts, chapter 129, section 126, is
25 amended to read as follows:

26 SEC. 126. CHILD CARE ASSISTANCE. There is appropriated
27 from the general fund of the state to the department of human
28 services for the fiscal year beginning July 1, 2012, and ending
29 June 30, 2013, the following amount, or so much thereof as is
30 necessary, to be used for the purpose designated:

31 For child care programs:

32 \$ ~~26,618,831~~
33 61,087,940

34 1. Of the funds appropriated in this section, ~~\$25,948,041~~
35 \$59,718,513 shall be used for state child care assistance in

LSB 5118SV (3) 84

-37-

pf/jp

37/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 accordance with section 237A.13.

2 2. Nothing in this section shall be construed or is
3 intended as or shall imply a grant of entitlement for services
4 to persons who are eligible for assistance due to an income
5 level consistent with the waiting list requirements of section
6 237A.13. Any state obligation to provide services pursuant to
7 this section is limited to the extent of the funds appropriated
8 in this section.

9 3. Of the funds appropriated in this section, ~~\$216,226~~
10 \$432,453 is allocated for the statewide program for child care
11 resource and referral services under section 237A.26. A list
12 of the registered and licensed child care facilities operating
13 in the area served by a child care resource and referral
14 service shall be made available to the families receiving state
15 child care assistance in that area.

16 4. Of the funds appropriated in this section, ~~\$468,487~~
17 \$936,974 is allocated for child care quality improvement
18 initiatives including but not limited to the voluntary quality
19 rating system in accordance with section 237A.30.

20 5. The department may use any of the funds appropriated
21 in this section as a match to obtain federal funds for use in
22 expanding child care assistance and related programs. For
23 the purpose of expenditures of state and federal child care
24 funding, funds shall be considered obligated at the time
25 expenditures are projected or are allocated to the department's
26 service areas. Projections shall be based on current and
27 projected caseload growth, current and projected provider
28 rates, staffing requirements for eligibility determination
29 and management of program requirements including data systems
30 management, staffing requirements for administration of the
31 program, contractual and grant obligations and any transfers
32 to other state agencies, and obligations for decategorization
33 or innovation projects.

34 6. A portion of the state match for the federal child care
35 and development block grant shall be provided as necessary to

LSB 5118SV (3) 84

-38-

pf/jp

38/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 meet federal matching funds requirements through the state
2 general fund appropriation made for child development grants
3 and other programs for at-risk children in section 279.51.
4 7. If a uniform reduction ordered by the governor under
5 section 8.31 or other operation of law, transfer, or federal
6 funding reduction reduces the appropriation made in this
7 section for the fiscal year, the percentage reduction in the
8 amount paid out to or on behalf of the families participating
9 in the state child care assistance program shall be equal to or
10 less than the percentage reduction made for any other purpose
11 payable from the appropriation made in this section and the
12 federal funding relating to it. The percentage reduction to
13 the other allocations made in this section shall be the same as
14 the uniform reduction ordered by the governor or the percentage
15 change of the federal funding reduction, as applicable.
16 If there is an unanticipated increase in federal funding
17 provided for state child care assistance, the entire amount
18 of the increase shall be used for state child care assistance
19 payments. If the appropriations made for purposes of the
20 state child care assistance program for the fiscal year are
21 determined to be insufficient, it is the intent of the general
22 assembly to appropriate sufficient funding for the fiscal year
23 in order to avoid establishment of waiting list requirements.
24 8. Notwithstanding section 8.33, moneys ~~appropriated~~
25 ~~in this section or~~ advanced for purposes of the programs
26 developed by early childhood Iowa areas, advanced for purposes
27 of wraparound child care, or received from the federal
28 appropriations made for the purposes of this section that
29 remain unencumbered or unobligated at the close of the fiscal
30 year shall not revert to any fund but shall remain available
31 for expenditure for the purposes designated until the close of
32 the succeeding fiscal year.
33 Sec. 21. 2011 Iowa Acts, chapter 129, section 127, is
34 amended to read as follows:
35 SEC. 127. JUVENILE INSTITUTIONS. There is appropriated



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 from the general fund of the state to the department of human
2 services for the fiscal year beginning July 1, 2012, and ending
3 June 30, 2013, the following amounts, or so much thereof as is
4 necessary, to be used for the purposes designated:

5 1. For operation of the Iowa juvenile home at Toledo and for
6 salaries, support, maintenance, and miscellaneous purposes, and
7 for not more than the following full-time equivalent positions:

8	\$	4,129,125
9		<u>8,328,264</u>
10	FTEs	114.00

11 2. For operation of the state training school at Eldora and
12 for salaries, support, maintenance, and miscellaneous purposes,
13 and for not more than the following full-time equivalent
14 positions:

15	\$	5,319,338
16		<u>10,740,988</u>
17	FTEs	164.30

18 Of the funds appropriated in this subsection, ~~\$45,575~~
19 \$91,150 shall be used for distribution to licensed classroom
20 teachers at this and other institutions under the control of
21 the department of human services based upon the average student
22 yearly enrollment at each institution as determined by the
23 department.

24 3. A portion of the moneys appropriated in this section
25 shall be used by the state training school and by the Iowa
26 juvenile home for grants for adolescent pregnancy prevention
27 activities at the institutions in the fiscal year beginning
28 July 1, 2012.

29 Sec. 22. 2011 Iowa Acts, chapter 129, section 128, is
30 amended to read as follows:

31 SEC. 128. CHILD AND FAMILY SERVICES.

32 1. There is appropriated from the general fund of the
33 state to the department of human services for the fiscal year
34 beginning July 1, 2012, and ending June 30, 2013, the following
35 amount, or so much thereof as is necessary, to be used for the

LSB 5118SV (3) 84

-40-

pf/jp

40/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 purpose designated:

2 For child and family services:

3 \$ ~~41,415,081~~
4 83,669,130

5 2. In order to address a reduction of \$5,200,000 from the
6 amount allocated under the appropriation made for the purposes
7 of this section in prior years for purposes of juvenile
8 delinquent graduated sanction services, up to ~~\$2,600,000~~
9 \$5,200,000 of the amount of federal temporary assistance
10 for needy families block grant funding appropriated in this
11 division of this Act for child and family services shall be
12 made available for purposes of juvenile delinquent graduated
13 sanction services.

14 3. The department may transfer funds appropriated in this
15 section as necessary to pay the nonfederal costs of services
16 reimbursed under the medical assistance program, state child
17 care assistance program, or the family investment program which
18 are provided to children who would otherwise receive services
19 paid under the appropriation in this section. The department
20 may transfer funds appropriated in this section to the
21 appropriations made in this division of this Act for general
22 administration and for field operations for resources necessary
23 to implement and operate the services funded in this section.

24 4. a. Of the funds appropriated in this section, up
25 to ~~\$15,084,564~~ \$31,372,177 is allocated as the statewide
26 expenditure target under section 232.143 for group foster care
27 maintenance and services. If the department projects that such
28 expenditures for the fiscal year will be less than the target
29 amount allocated in this lettered paragraph, the department may
30 reallocate the excess to provide additional funding for shelter
31 care or the child welfare emergency services addressed with the
32 allocation for shelter care.

33 b. If at any time after September 30, 2012, annualization
34 of a service area's current expenditures indicates a service
35 area is at risk of exceeding its group foster care expenditure

LSB 5118SV (3) 84

-41-

pf/jp

41/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 target under section 232.143 by more than 5 percent, the
2 department and juvenile court services shall examine all
3 group foster care placements in that service area in order to
4 identify those which might be appropriate for termination.
5 In addition, any aftercare services believed to be needed
6 for the children whose placements may be terminated shall be
7 identified. The department and juvenile court services shall
8 initiate action to set dispositional review hearings for the
9 placements identified. In such a dispositional review hearing,
10 the juvenile court shall determine whether needed aftercare
11 services are available and whether termination of the placement
12 is in the best interest of the child and the community.

13 5. In accordance with the provisions of section 232.188,
14 the department shall continue the child welfare and juvenile
15 justice funding initiative during fiscal year 2012-2013. Of
16 the funds appropriated in this section, ~~\$858,876~~ \$1,717,753
17 is allocated specifically for expenditure for fiscal year
18 2012-2013 through the decategorization service funding pools
19 and governance boards established pursuant to section 232.188.

20 6. A portion of the funds appropriated in this section
21 may be used for emergency family assistance to provide other
22 resources required for a family participating in a family
23 preservation or reunification project or successor project to
24 stay together or to be reunified.

25 7. Notwithstanding section 234.35 or any other provision
26 of law to the contrary, state funding for shelter care and
27 the child welfare emergency services contracting implemented
28 to provide for or prevent the need for shelter care shall be
29 limited to ~~\$3,585,058~~ \$7,370,116. The department may continue
30 or execute contracts that result from the department's request
31 for proposal, bid number ACFS-11-114, to provide the range of
32 child welfare emergency services described in the request for
33 proposals, and any subsequent amendments to the request for
34 proposals.

35 8. Federal funds received by the state during the fiscal

LSB 5118SV (3) 84

-42-

pf/jp

42/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 year beginning July 1, 2012, as the result of the expenditure
2 of state funds appropriated during a previous state fiscal
3 year for a service or activity funded under this section are
4 appropriated to the department to be used as additional funding
5 for services and purposes provided for under this section.
6 Notwithstanding section 8.33, moneys received in accordance
7 with this subsection that remain unencumbered or unobligated at
8 the close of the fiscal year shall not revert to any fund but
9 shall remain available for the purposes designated until the
10 close of the succeeding fiscal year.

11 ~~9. Of the funds appropriated in this section, at least~~
12 ~~\$1,848,142 shall be used for protective child care assistance.~~

13 10. a. Of the funds appropriated in this section, up to
14 ~~\$1,031,244~~ \$2,062,488 is allocated for the payment of the
15 expenses of court-ordered services provided to juveniles who
16 are under the supervision of juvenile court services, which
17 expenses are a charge upon the state pursuant to section
18 232.141, subsection 4. Of the amount allocated in this
19 lettered paragraph, up to ~~\$778,143~~ \$1,556,287 shall be made
20 available to provide school-based supervision of children
21 adjudicated under chapter 232, of which not more than ~~\$7,500~~
22 \$15,000 may be used for the purpose of training. A portion of
23 the cost of each school-based liaison officer shall be paid by
24 the school district or other funding source as approved by the
25 chief juvenile court officer.

26 b. Of the funds appropriated in this section, up to ~~\$374,492~~
27 \$748,985 is allocated for the payment of the expenses of
28 court-ordered services provided to children who are under the
29 supervision of the department, which expenses are a charge upon
30 the state pursuant to section 232.141, subsection 4.

31 c. Notwithstanding section 232.141 or any other provision
32 of law to the contrary, the amounts allocated in this
33 subsection shall be distributed to the judicial districts
34 as determined by the state court administrator and to the
35 department's service areas as determined by the administrator

LSB 5118SV (3) 84

-43-

pf/jp

43/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 of the department's division of child and family services. The
2 state court administrator and the division administrator shall
3 make the determination of the distribution amounts on or before
4 June 15, 2012.

5 d. Notwithstanding chapter 232 or any other provision of
6 law to the contrary, a district or juvenile court shall not
7 order any service which is a charge upon the state pursuant
8 to section 232.141 if there are insufficient court-ordered
9 services funds available in the district court or departmental
10 service area distribution amounts to pay for the service. The
11 chief juvenile court officer and the departmental service area
12 manager shall encourage use of the funds allocated in this
13 subsection such that there are sufficient funds to pay for
14 all court-related services during the entire year. The chief
15 juvenile court officers and departmental service area managers
16 shall attempt to anticipate potential surpluses and shortfalls
17 in the distribution amounts and shall cooperatively request the
18 state court administrator or division administrator to transfer
19 funds between the judicial districts' or departmental service
20 areas' distribution amounts as prudent.

21 e. Notwithstanding any provision of law to the contrary,
22 a district or juvenile court shall not order a county to pay
23 for any service provided to a juvenile pursuant to an order
24 entered under chapter 232 which is a charge upon the state
25 under section 232.141, subsection 4.

26 f. Of the funds allocated in this subsection, not more
27 than ~~\$41,500~~ \$83,000 may be used by the judicial branch for
28 administration of the requirements under this subsection.

29 g. Of the funds allocated in this subsection, ~~\$8,500~~ \$17,000
30 shall be used by the department of human services to support
31 the interstate commission for juveniles in accordance with
32 the interstate compact for juveniles as provided in section
33 232.173.

34 11. Of the funds appropriated in this section, ~~\$2,961,301~~
35 \$6,222,602 is allocated for juvenile delinquent graduated

LSB 5118SV (3) 84

-44-

pf/jp

44/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 sanctions services. Any state funds saved as a result of
2 efforts by juvenile court services to earn federal Tit. IV-E
3 match for juvenile court services administration may be used
4 for the juvenile delinquent graduated sanctions services.

5 12. Of the funds appropriated in this section, ~~\$494,142~~
6 \$2,238,285 shall be transferred to the department of public
7 health to be used for the child protection center grant program
8 in accordance with section 135.118. Of the amount allocated in
9 this subsection, \$250,000 shall be used for a center for the
10 Black Hawk county area.

11 13. If the department receives federal approval to
12 implement a waiver under Tit. IV-E of the federal Social
13 Security Act to enable providers to serve children who remain
14 in the children's families and communities, for purposes of
15 eligibility under the medical assistance program, children who
16 participate in the waiver shall be considered to be placed in
17 foster care.

18 14. Of the funds appropriated in this section, ~~\$1,534,916~~
19 \$3,092,375 is allocated for the preparation for adult living
20 program pursuant to section 234.46.

21 15. Of the funds appropriated in this section, ~~\$260,075~~
22 \$520,150 shall be used for juvenile drug courts. The amount
23 allocated in this subsection shall be distributed as follows:

24 To the judicial branch for salaries to assist with the
25 operation of juvenile drug court programs operated in the
26 following jurisdictions:

27 a. Marshall county:

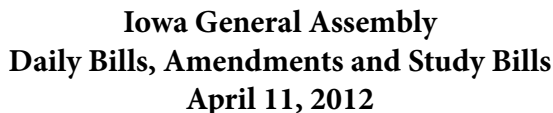
28 \$ 31,354
29 62,708

30 b. Woodbury county:

31 \$ 62,841
32 125,682

33 c. Polk county:

34 \$ 97,946
35 195,892



1 d. The third judicial district:
2 \$ 33,967
3 67,934
4 e. The eighth judicial district:
5 \$ 33,967
6 67,934
7 16. Of the funds appropriated in this section, ~~\$113,668~~
8 \$227,337 shall be used for the public purpose of ~~providing~~
9 continuing a grant to a nonprofit human services organization
10 providing services to individuals and families in multiple
11 locations in southwest Iowa and Nebraska for support of a
12 project providing immediate, sensitive support and forensic
13 interviews, medical exams, needs assessments, and referrals for
14 victims of child abuse and their nonoffending family members.
15 17. Of the funds appropriated in this section, ~~\$62,795~~
16 \$200,590 is allocated for the ~~elevate~~ foster care youth council
17 approach of providing a support network to children placed in
18 foster care.
19 18. Of the funds appropriated in this section, ~~\$101,000~~
20 \$202,000 is allocated for use pursuant to section 235A.1 for
21 continuation of the initiative to address child sexual abuse
22 implemented pursuant to 2007 Iowa Acts, chapter 218, section
23 18, subsection 21.
24 19. Of the funds appropriated in this section, ~~\$315,120~~
25 \$630,240 is allocated for the community partnership for child
26 protection sites.
27 20. Of the funds appropriated in this section, ~~\$185,625~~
28 \$371,250 is allocated for the department's minority youth and
29 family projects under the redesign of the child welfare system.
30 21. Of the funds appropriated in this section, ~~\$600,247~~
31 \$1,436,595 is allocated for funding of the ~~state match for~~
32 community circle of care collaboration for children and
33 youth in northeast Iowa, formerly referred to as the federal
34 substance abuse and mental health services administration
35 (SAMHSA) system of care grant.



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 22. Of the funds appropriated in this section, at least
2 ~~\$73,579~~ \$147,158 shall be used for the child welfare training
3 academy.

4 23. Of the funds appropriated in this section, ~~\$12,500~~
5 \$25,000 shall be used for the public purpose of continuation
6 of a grant to a child welfare services provider headquartered
7 in a county with a population between 205,000 and 215,000 in
8 the latest certified federal census that provides multiple
9 services including but not limited to a psychiatric medical
10 institution for children, shelter, residential treatment, after
11 school programs, school-based programming, and an Asperger's
12 syndrome program, to be used for support services for children
13 with autism spectrum disorder and their families.

14 23A. Of the funds appropriated in this section, \$25,000
15 shall be used for the public purpose of providing a grant to
16 a hospital-based provider headquartered in a county with a
17 population between 90,000 and 95,000 in the latest certified
18 federal census that provides multiple services including
19 but not limited to diagnostic, therapeutic, and behavioral
20 services to individuals with autism spectrum disorder across
21 the lifespan. The grant recipient shall utilize the funds to
22 implement a pilot project to determine the necessary support
23 services for children with autism spectrum disorder and
24 their families to be included in the children's disabilities
25 services system. The grant recipient shall submit findings and
26 recommendations based upon the results of the pilot project
27 to the individuals specified in this division of this Act for
28 submission of reports by December 31, 2012.

29 24. Of the funds appropriated in this section ~~\$125,000~~
30 \$327,947 shall be used for continuation of the central Iowa
31 system of care program grant through June 30, 2013.

32 25. Of the funds appropriated in this section, ~~\$80,000~~
33 \$160,000 shall be used for the public purpose of the
34 continuation of a system of care grant implemented in Cerro
35 Gordo and Linn counties in accordance with this Act in FY

LSB 5118SV (3) 84

-47-

pf/jp

47/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 2011-2012.

2 Sec. 23. 2011 Iowa Acts, chapter 129, section 129, is
3 amended to read as follows:

4 SEC. 129. ADOPTION SUBSIDY.

5 1. There is appropriated from the general fund of the
6 state to the department of human services for the fiscal year
7 beginning July 1, 2012, and ending June 30, 2013, the following
8 amount, or so much thereof as is necessary, to be used for the
9 purpose designated:

10 For adoption subsidy payments and services:

11 \$ ~~16,633,295~~
12 33,238,897

13 2. The department may transfer funds appropriated in
14 this section to the appropriation made in this division of
15 this Act for general administration for costs paid from the
16 appropriation relating to adoption subsidy.

17 3. Federal funds received by the state during the
18 fiscal year beginning July 1, 2012, as the result of the
19 expenditure of state funds during a previous state fiscal
20 year for a service or activity funded under this section are
21 appropriated to the department to be used as additional funding
22 for the services and activities funded under this section.
23 Notwithstanding section 8.33, moneys received in accordance
24 with this subsection that remain unencumbered or unobligated
25 at the close of the fiscal year shall not revert to any fund
26 but shall remain available for expenditure for the purposes
27 designated until the close of the succeeding fiscal year.

28 Sec. 24. 2011 Iowa Acts, chapter 129, section 131, is
29 amended to read as follows:

30 SEC. 131. FAMILY SUPPORT SUBSIDY PROGRAM.

31 1. There is appropriated from the general fund of the
32 state to the department of human services for the fiscal year
33 beginning July 1, 2012, and ending June 30, 2013, the following
34 amount, or so much thereof as is necessary, to be used for the
35 purpose designated:

LSB 5118SV (3) 84

-48-

pf/jp

48/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 For the family support subsidy program subject to the
2 enrollment restrictions in section 225C.37, subsection 3:
3 \$ 583,999
4 1,096,784

5 2. The department shall use at least ~~\$192,750~~ \$385,500
6 of the moneys appropriated in this section for the family
7 support center component of the comprehensive family support
8 program under section 225C.47. Not more than ~~\$12,500~~ \$25,000
9 of the amount allocated in this subsection shall be used for
10 administrative costs.

11 3. If at any time during the fiscal year, the amount of
12 funding available for the family support subsidy program
13 is reduced from the amount initially used to establish the
14 figure for the number of family members for whom a subsidy
15 is to be provided at any one time during the fiscal year,
16 notwithstanding section 225C.38, subsection 2, the department
17 shall revise the figure as necessary to conform to the amount
18 of funding available.

19 Sec. 25. 2011 Iowa Acts, chapter 129, section 132, is
20 amended to read as follows:

21 SEC. 132. CONNER DECREE. There is appropriated from the
22 general fund of the state to the department of human services
23 for the fiscal year beginning July 1, 2012, and ending June 30,
24 2013, the following amount, or so much thereof as is necessary,
25 to be used for the purpose designated:

26 For building community capacity through the coordination
27 and provision of training opportunities in accordance with the
28 consent decree of Conner v. Branstad, No. 4-86-CV-30871(S.D.
29 Iowa, July 14, 1994):

30 \$ ~~16,811~~
31 33,622

32 Sec. 26. 2011 Iowa Acts, chapter 129, section 133, is
33 amended to read as follows:

34 SEC. 133. MENTAL HEALTH INSTITUTES. There is appropriated
35 from the general fund of the state to the department of human

LSB 5118SV (3) 84

-49-

pf/jp

49/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 services for the fiscal year beginning July 1, 2012, and ending
2 June 30, 2013, the following amounts, or so much thereof as is
3 necessary, to be used for the purposes designated:

4 1. For the state mental health institute at Cherokee for
5 salaries, support, maintenance, and miscellaneous purposes, and
6 for not more than the following full-time equivalent positions:

7 \$ ~~2,938,654~~
8 5,641,037
9 FTEs 168.50

10 2. For the state mental health institute at Clarinda for
11 salaries, support, maintenance, and miscellaneous purposes, and
12 for not more than the following full-time equivalent positions:

13 \$ ~~3,205,867~~
14 6,463,337
15 FTEs 86.10

16 3. For the state mental health institute at Independence for
17 salaries, support, maintenance, and miscellaneous purposes, and
18 for not more than the following full-time equivalent positions:

19 \$ ~~5,137,842~~
20 9,804,212
21 FTEs 233.00

22 4. For the state mental health institute at Mount Pleasant
23 for salaries, support, maintenance, and miscellaneous purposes,
24 and for not more than the following full-time equivalent
25 positions:

26 \$ ~~472,161~~
27 944,323
28 FTEs 97.72

29 Sec. 27. 2011 Iowa Acts, chapter 129, section 134, is
30 amended to read as follows:

31 SEC. 134. STATE RESOURCE CENTERS.

32 1. There is appropriated from the general fund of the
33 state to the department of human services for the fiscal year
34 beginning July 1, 2012, and ending June 30, 2013, the following
35 amounts, or so much thereof as is necessary, to be used for the

LSB 5118SV (3) 84

-50-

pf/jp

50/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 purposes designated:

2 a. For the state resource center at Glenwood for salaries,
3 support, maintenance, and miscellaneous purposes:

4 \$ ~~9,253,900~~
5 19,092,576

6 b. For the state resource center at Woodward for salaries,
7 support, maintenance, and miscellaneous purposes:

8 \$ ~~6,392,829~~
9 13,176,093

10 2. The department may continue to bill for state resource
11 center services utilizing a scope of services approach used for
12 private providers of ICFMR services, in a manner which does not
13 shift costs between the medical assistance program, counties,
14 or other sources of funding for the state resource centers.

15 3. The state resource centers may expand the time-limited
16 assessment and respite services during the fiscal year.

17 4. If the department's administration and the department
18 of management concur with a finding by a state resource
19 center's superintendent that projected revenues can reasonably
20 be expected to pay the salary and support costs for a new
21 employee position, or that such costs for adding a particular
22 number of new positions for the fiscal year would be less
23 than the overtime costs if new positions would not be added,
24 the superintendent may add the new position or positions. If
25 the vacant positions available to a resource center do not
26 include the position classification desired to be filled, the
27 state resource center's superintendent may reclassify any
28 vacant position as necessary to fill the desired position. The
29 superintendents of the state resource centers may, by mutual
30 agreement, pool vacant positions and position classifications
31 during the course of the fiscal year in order to assist one
32 another in filling necessary positions.

33 5. If existing capacity limitations are reached in
34 operating units, a waiting list is in effect for a service or
35 a special need for which a payment source or other funding

LSB 5118SV (3) 84

-51-

pf/jp

51/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 is available for the service or to address the special need,
2 and facilities for the service or to address the special need
3 can be provided within the available payment source or other
4 funding, the superintendent of a state resource center may
5 authorize opening not more than two units or other facilities
6 and begin implementing the service or addressing the special
7 need during fiscal year 2012-2013.

8 Sec. 28. 2011 Iowa Acts, chapter 129, section 135, is
9 amended to read as follows:

10 SEC. 135. MI/MR/DD STATE CASES.

11 1. There is appropriated from the general fund of the
12 state to the department of human services for the fiscal year
13 beginning July 1, 2012, and ending June 30, 2013, the following
14 amount, or so much thereof as is necessary, to be used for the
15 purpose designated:

16 For distribution to counties for state case services
17 for persons with mental illness, mental retardation, and
18 developmental disabilities in accordance with section 331.440:
19 \$ ~~6,084,741~~
20 12,169,482

21 2. For the fiscal year beginning July 1, 2012, and ending
22 June 30, 2013, ~~\$100,000~~ \$200,000 is allocated for state case
23 services from the amounts appropriated from the fund created
24 in section 8.41 to the department of human services from the
25 funds received from the federal government under 42 U.S.C. ch.
26 6A, subch. XVII, relating to the community mental health center
27 block grant, for the federal fiscal years beginning October
28 1, 2010, and ending September 30, 2011, beginning October 1,
29 2011, and ending September 30, 2012, and beginning October 1,
30 2012, and ending September 30, 2013. The allocation made in
31 this subsection shall be made prior to any other distribution
32 allocation of the appropriated federal funds.

33 3. Notwithstanding section 8.33, moneys appropriated in
34 this section that remain unencumbered or unobligated at the
35 close of the fiscal year shall not revert but shall remain



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 available for expenditure for the purposes designated until the
2 close of the succeeding fiscal year.

3 Sec. 29. 2011 Iowa Acts, chapter 129, section 137, is
4 amended to read as follows:

5 SEC. 137. SEXUALLY VIOLENT PREDATORS.

6 1. There is appropriated from the general fund of the
7 state to the department of human services for the fiscal year
8 beginning July 1, 2012, and ending June 30, 2013, the following
9 amount, or so much thereof as is necessary, to be used for the
10 purpose designated:

11 For costs associated with the commitment and treatment of
12 sexually violent predators in the unit located at the state
13 mental health institute at Cherokee, including costs of legal
14 services and other associated costs, including salaries,
15 support, maintenance, and miscellaneous purposes, and for not
16 more than the following full-time equivalent positions:

17	\$	3,775,363
18		<u>9,113,668</u>
19	FTEs	89.50
20		<u>95.90</u>

21 2. Unless specifically prohibited by law, if the amount
22 charged provides for recoupment of at least the entire amount
23 of direct and indirect costs, the department of human services
24 may contract with other states to provide care and treatment
25 of persons placed by the other states at the unit for sexually
26 violent predators at Cherokee. The moneys received under
27 such a contract shall be considered to be repayment receipts
28 and used for the purposes of the appropriation made in this
29 section.

30 Sec. 30. 2011 Iowa Acts, chapter 129, section 138, is
31 amended to read as follows:

32 SEC. 138. FIELD OPERATIONS. There is appropriated from the
33 general fund of the state to the department of human services
34 for the fiscal year beginning July 1, 2012, and ending June 30,
35 2013, the following amount, or so much thereof as is necessary,

LSB 5118SV (3) 84

-53-

pf/jp

53/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 to be used for the purposes designated:

2 For field operations, including salaries, support,
3 maintenance, and miscellaneous purposes, and for not more than
4 the following full-time equivalent positions:

5	\$	27,394,960
6		<u>61,915,440</u>
7	FTEs	1,781.00

8 Priority in filling full-time equivalent positions shall be
9 given to those positions related to child protection services
10 and eligibility determination for low-income families.

11 Notwithstanding section 8.33, moneys appropriated in this
12 section that remain unencumbered or unobligated at the close of
13 the fiscal year shall not revert but shall remain available for
14 expenditure for the purposes designated until the close of the
15 succeeding fiscal year.

16 Sec. 31. 2011 Iowa Acts, chapter 129, section 139, is
17 amended to read as follows:

18 SEC. 139. GENERAL ADMINISTRATION. There is appropriated
19 from the general fund of the state to the department of human
20 services for the fiscal year beginning July 1, 2012, and ending
21 June 30, 2013, the following amount, or so much thereof as is
22 necessary, to be used for the purpose designated:

23 For general administration, including salaries, support,
24 maintenance, and miscellaneous purposes, and for not more than
25 the following full-time equivalent positions:

26	\$	7,298,372
27		<u>15,841,874</u>
28	FTEs	285.00

29 1. Of the funds appropriated in this section, ~~\$19,271~~
30 \$38,543 allocated for the prevention of disabilities policy
31 council established in section 225B.3.

32 2. The department shall report at least monthly to the
33 legislative services agency concerning the department's
34 operational and program expenditures.

35 3. Of the funds appropriated in this section, ~~\$66,150~~

LSB 5118SV (3) 84

-54-

pf/jp

54/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 \$132,300 shall be used to continue the contract for the
2 provision of a program to provide technical assistance,
3 support, and consultation to providers of habilitation services
4 and home and community-based services waiver services for
5 adults with disabilities under the medical assistance program.

6 4. Of the funds appropriated in this section, ~~\$88,200~~
7 \$500,000 shall be used to continue the contract to expand
8 the provision of nationally accredited and recognized
9 internet-based training to include mental health and disability
10 services providers.

11 5. Of the funds appropriated in this section, ~~\$250,000~~
12 \$500,000 shall be used for continuation of child protection
13 system improvements addressed in 2011 Iowa Acts, ~~House File~~
14 ~~562, as enacted~~ chapter 28.

15 6. Notwithstanding section 8.33, moneys appropriated in
16 this section that remain unencumbered or unobligated at the
17 close of the fiscal year shall not revert but shall remain
18 available for expenditure for the purposes designated until the
19 close of the succeeding fiscal year.

20 Sec. 32. 2011 Iowa Acts, chapter 129, section 140, is
21 amended to read as follows:

22 SEC. 140. VOLUNTEERS. There is appropriated from the
23 general fund of the state to the department of human services
24 for the fiscal year beginning July 1, 2012, and ending June 30,
25 2013, the following amount, or so much thereof as is necessary,
26 to be used for the purpose designated:

27 For development and coordination of volunteer services:

28	\$	42,330
29		<u>84,660</u>

30 PROVIDER REIMBURSEMENT — NURSING FACILITIES

31 Sec. 33. 2011 Iowa Acts, chapter 129, section 141,
32 subsection 1, paragraph a, subparagraph (1), is amended to read
33 as follows:

34 (1) For the fiscal year beginning July 1, 2012, the total
35 state funding amount for the nursing facility budget shall not

LSB 5118SV (3) 84

-55-

pf/jp

55/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 exceed ~~\$225,457,724~~ \$237,226,901.

2 PROVIDER REIMBURSEMENT — PHARMACY, PMICS, HOME HEALTH
3 AGENCIES, HCBS WAIVER

4 Sec. 34. 2011 Iowa Acts, chapter 129, section 141,
5 subsection 1, paragraphs b, f, i, and q, are amended to read as
6 follows:

7 b. (1) For the fiscal year beginning July 1, 2012, the
8 department shall reimburse pharmacy dispensing fees using a
9 single rate of ~~\$4.34~~ \$11.10 per prescription or the pharmacy's
10 usual and customary fee, whichever is lower. ~~However,~~
11 ~~the department shall adjust the dispensing fee specified~~
12 ~~in this paragraph to distribute an additional \$2,981,980~~
13 ~~in reimbursements for pharmacy dispensing fees under this~~
14 ~~paragraph for the fiscal year.~~

15 (2) The department shall implement an average acquisition
16 cost reimbursement methodology for all drugs covered under the
17 medical assistance program. The methodology shall utilize a
18 survey of pharmacy invoices in determining the reimbursement.
19 Pharmacies and providers that are enrolled in the medical
20 assistance program shall make available drug acquisition cost
21 information, product availability information, and other
22 information deemed necessary by the department to assist the
23 department in monitoring and revising reimbursement rates and
24 for efficient operation of the pharmacy benefit.

25 (a) A pharmacy or provider shall produce and submit the
26 requested information in the manner and format requested by the
27 department or its designee at no cost to the department or its
28 designee.

29 (b) A pharmacy or provider shall submit information to the
30 department or its designee within the time frame indicated
31 following receipt of a request for information unless the
32 department or its designee grants an extension upon written
33 request of the pharmacy or provider.

34 f. For the fiscal year beginning July 1, 2012, reimbursement
35 rates for home health agencies shall ~~remain at~~ be increased by



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 2 percent over the rates in effect on June 30, 2012, not to
2 exceed a home health agency's actual allowable cost.

3 i. (1) For the fiscal year beginning July 1, 2012,
4 state-owned psychiatric medical institutions for children shall
5 receive cost-based reimbursement for 100 percent of the actual
6 and allowable costs for the provision of services to recipients
7 of medical assistance.

8 (2) For the nonstate-owned psychiatric medical institutions
9 for children, reimbursement rates shall be based on the
10 reimbursement methodology developed by the department as
11 required for federal compliance.

12 (3) As a condition of participation in the medical
13 assistance program, enrolled providers shall accept the medical
14 assistance reimbursement rate for any covered goods or services
15 provided to recipients of medical assistance who are children
16 under the custody of a psychiatric medical institution for
17 children.

18 q. For the fiscal year beginning July 1, 2012, the
19 ~~department shall adjust the rates in effect on June 30, 2012,~~
20 reimbursement rates for providers of home and community-based
21 services waiver services ~~to distribute an additional \$1,500,000~~
22 ~~in reimbursements to such providers for the fiscal year shall~~
23 be increased by 2 percent over the rates in effect on June 30,
24 2012.

25 PROVIDER REIMBURSEMENT — FOSTER FAMILY AND GROUP FOSTER CARE

26 Sec. 35. 2011 Iowa Acts, chapter 129, section 141,
27 subsections 4 and 6, are amended to read as follows:

28 4. For the fiscal year beginning July 1, 2012,
29 notwithstanding section 234.38, the foster family basic daily
30 maintenance rate and the maximum adoption subsidy rate for
31 children ages 0 through 5 years shall be ~~\$15.74~~ \$16.37, the
32 rate for children ages 6 through 11 years shall be ~~\$16.37~~
33 \$17.02, the rate for children ages 12 through 15 years shall be
34 ~~\$17.92~~ \$18.64, and the rate for children and young adults ages
35 16 and older shall be ~~\$18.16~~ \$18.89. The maximum supervised

LSB 5118SV (3) 84

-57-

pf/jp

57/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 apartment living foster care reimbursement rate shall be \$25.00
2 per day. For youth ages 18 to 21 who have exited foster care,
3 the maximum preparation for adult living program maintenance
4 rate shall be \$574.00 per month. The maximum payment for
5 adoption subsidy nonrecurring expenses shall be limited to \$500
6 and the disallowance of additional amounts for court costs and
7 other related legal expenses implemented pursuant to 2010 Iowa
8 Acts, chapter 1031, section 408 shall be continued.

9 6. a. For the fiscal year beginning July 1, 2012, the
10 reimbursement rates for family-centered service providers,
11 family foster care service providers, ~~group foster care service~~
12 ~~providers,~~ and the resource family recruitment and retention
13 contractor shall remain at the rates in effect on June 30,
14 2012.

15 b. For the fiscal year beginning July 1, 2012, the
16 reimbursement rate for group foster care service providers
17 shall be increased by 4 percent over the rate in effect on June
18 30, 2012.

19 PROVIDER REIMBURSEMENT — CHILD CARE

20 Sec. 36. 2011 Iowa Acts, chapter 129, section 141,
21 subsection 10, is amended to read as follows:

22 10. For the fiscal year beginning July 1, 2012, for child
23 care providers reimbursed under the state child care assistance
24 program, the department shall set provider reimbursement
25 rates based on the rate reimbursement survey completed in
26 December 2004. Effective July 1, 2012, the child care provider
27 reimbursement rates shall ~~remain at~~ be increased by 4 percent
28 over the rates in effect on June 30, 2012. The department
29 shall set rates in a manner so as to provide incentives for a
30 nonregistered provider to become registered by applying the
31 increase only to registered and licensed providers.

32 REBASING STUDY — MEDICAID HOME HEALTH AND HCBS WAIVER SERVICE
33 PROVIDERS

34 Sec. 37. 2011 Iowa Acts, chapter 129, section 141, is
35 amended by adding the following new subsection:

LSB 5118SV (3) 84

-58-

pf/jp

58/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 NEW SUBSECTION. 10A. The department shall review
2 reimbursement of home health agency and home and
3 community-based services waiver services providers and shall
4 submit a recommendation for a rebasing methodology applicable
5 to such providers for the fiscal year beginning July 1, 2013,
6 and thereafter, to the individuals identified in this division
7 of this Act for receipt of reports.

8 ELDERLY WAIVER

9 Sec. 38. 2011 Iowa Acts, chapter 129, section 141, is
10 amended by adding the following new subsection:

11 NEW SUBSECTION. 10B. The department shall increase the
12 monthly reimbursement cap for the medical assistance home and
13 community-based services waiver for the elderly to \$1,400 per
14 month.

15 REPORTS

16 Sec. 39. 2011 Iowa Acts, chapter 129, section 143, is
17 amended to read as follows:

18 SEC. 143. REPORTS. Any reports or other information
19 required to be compiled and submitted under this Act shall be
20 submitted to the chairpersons and ranking members of the joint
21 appropriations subcommittee on health and human services, the
22 legislative services agency, and the legislative caucus staffs
23 on or before the dates specified for submission of the reports
24 or information.

25 DIVISION V

26 HEALTH CARE ACCOUNTS AND FUNDS

27 PHARMACEUTICAL SETTLEMENT ACCOUNT

28 Sec. 40. 2011 Iowa Acts, chapter 129, section 145, is
29 amended to read as follows:

30 SEC. 145. PHARMACEUTICAL SETTLEMENT ACCOUNT. There is
31 appropriated from the pharmaceutical settlement account created
32 in section 249A.33 to the department of human services for the
33 fiscal year beginning July 1, 2012, and ending June 30, 2013,
34 the following amount, or so much thereof as is necessary, to be
35 used for the purpose designated:

LSB 5118SV (3) 84

-59-

pf/jp

59/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Notwithstanding any provision of law to the contrary, to
2 supplement the appropriations made in this Act for medical
3 contracts under the medical assistance program for the fiscal
4 year beginning July 1, 2012, and ending June 30, 2013:

5 \$ 2,716,807

6 IOWACARE ACCOUNT APPROPRIATIONS — UNIVERSITY OF IOWA HOSPITALS
7 AND CLINICS

8 Sec. 41. 2011 Iowa Acts, chapter 129, section 146,
9 subsection 2, unnumbered paragraph 2, is amended to read as
10 follows:

11 For salaries, support, maintenance, equipment, and
12 miscellaneous purposes, for the provision of medical and
13 surgical treatment of indigent patients, for provision of
14 services to members of the expansion population pursuant to
15 chapter 249J, and for medical education:

16 \$ ~~44,226,279~~
17 45,654,133

18 IOWACARE ACCOUNT — PUBLICLY OWNED ACUTE CARE TEACHING HOSPITAL

19 Sec. 42. 2011 Iowa Acts, chapter 129, section 146,
20 subsection 4, unnumbered paragraph 2, is amended to read as
21 follows:

22 For distribution to a publicly owned acute care teaching
23 hospital located in a county with a population over 350,000 for
24 the provision of medical and surgical treatment of indigent
25 patients, for provision of services to members of the expansion
26 population pursuant to chapter 249J, and for medical education:

27 \$ ~~65,000,000~~
28 70,000,000

29 IOWACARE ACCOUNT — PUBLICLY OWNED ACUTE CARE HOSPITAL
30 ALLOCATIONS

31 Sec. 43. 2011 Iowa Acts, chapter 129, section 146,
32 subsection 4, paragraphs a and b, are amended to read as
33 follows:

34 a. Notwithstanding any provision of law to the contrary,
35 the amount appropriated in this subsection shall be distributed



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 based on claims submitted, adjudicated, and paid by the Iowa
2 Medicaid enterprise plus a monthly disproportionate share
3 hospital payment. Any amount appropriated in this subsection
4 in excess of ~~\$60,000,000~~ \$65,000,000 shall be distributed only
5 if the sum of the expansion population claims adjudicated
6 and paid by the Iowa Medicaid enterprise plus the estimated
7 disproportionate share hospital payments exceeds ~~\$60,000,000~~
8 \$65,000,000. The amount paid in excess of ~~\$60,000,000~~
9 \$65,000,000 shall not adjust the original monthly payment
10 amount but shall be distributed monthly based on actual claims
11 adjudicated and paid by the Iowa Medicaid enterprise plus
12 the estimated disproportionate share hospital amount. Any
13 amount appropriated in this subsection in excess of ~~\$60,000,000~~
14 \$65,000,000 shall be allocated only if federal funds are
15 available to match the amount allocated. Pursuant to paragraph
16 "b", of the amount appropriated in this subsection, not more
17 than \$4,000,000 shall be distributed for prescription drugs,
18 and podiatry services, and optometric services.

19 b. Notwithstanding any provision of law to the contrary,
20 the hospital identified in this subsection, shall be reimbursed
21 for outpatient prescription drugs, and podiatry services,
22 and optometric services provided to members of the expansion
23 population pursuant to all applicable medical assistance
24 program rules, in an amount not to exceed \$4,000,000.

25 IOWACARE ACCOUNT — REGIONAL PROVIDER NETWORK

26 Sec. 44. 2011 Iowa Acts, chapter 129, section 146,
27 subsection 5, unnumbered paragraph 2, is amended to read as
28 follows:

29 For payment to the regional provider network specified
30 by the department pursuant to section 249J.7 for provision
31 of covered services to members of the expansion population
32 pursuant to chapter 249J:

33 \$ ~~3,472,176~~
34 4,986,366

35 ACCOUNT FOR HEALTH CARE TRANSFORMATION

LSB 5118SV (3) 84

-61-

pf/jp

61/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Sec. 45. 2011 Iowa Acts, chapter 129, section 148, is
2 amended to read as follows:

3 SEC. 148. APPROPRIATIONS FROM ACCOUNT FOR HEALTH CARE
4 TRANSFORMATION — DEPARTMENT OF HUMAN SERVICES.

5 Notwithstanding any provision to the contrary, there is
6 appropriated from the account for health care transformation
7 created in section 249J.23 to the department of human services
8 for the fiscal year beginning July 1, 2012, and ending June
9 30, 2013, the following amounts, or so much thereof as is
10 necessary, to be used for the purposes designated:

11 1. For the provision of an IowaCare nurse helpline for the
12 expansion population as provided in section 249J.6:

13 \$ 50,000
14 100,000

15 2. For other health promotion partnership activities
16 pursuant to section 249J.14:

17 \$ 300,000
18 600,000

19 3. For the costs related to audits, performance
20 evaluations, and studies required pursuant to chapter 249J:

21 \$ 62,500
22 125,000

23 4. For administrative costs associated with chapter 249J:

24 \$ 566,206
25 1,132,412

26 5. For planning and development, in cooperation with the
27 department of public health, of a phased-in program to provide
28 a dental home for children in accordance with section 249J.14:

29 \$ 500,000
30 1,000,000

31 6. For continuation of the establishment of the tuition
32 assistance for individuals serving individuals with
33 disabilities pilot program, as enacted in 2008 Iowa Acts,
34 chapter 1187, section 130:

35 \$ 25,000

LSB 5118SV (3) 84

-62-

pf/jp

62/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 50,000
2 7. For medical contracts:
3 \$ ~~1,000,000~~
4 2,400,000
5 8. For payment to the publicly owned acute care teaching
6 hospital located in a county with a population of over 350,000
7 that is a participating provider pursuant to chapter 249J:
8 \$ ~~145,000~~
9 290,000
10 Disbursements under this subsection shall be made monthly.
11 The hospital shall submit a report following the close of the
12 fiscal year regarding use of the funds appropriated in this
13 subsection to the persons specified in this Act to receive
14 reports.
15 9. For transfer to the department of public health to be
16 used for the costs of medical home system advisory council
17 established pursuant to section 135.159:
18 \$ ~~116,679~~
19 233,357
20 10. For continued implementation of a uniform cost report:
21 \$ ~~75,000~~
22 150,000
23 11. For continued implementation of an electronic medical
24 records system:
25 \$ ~~50,000~~
26 100,000
27 Notwithstanding section 8.33, funds allocated in this
28 subsection that remain unencumbered or unobligated at the close
29 of the fiscal year shall not revert but shall remain available
30 in succeeding fiscal years to be used for the purposes
31 designated.
32 12. For transfer to the department of public health to
33 support the department's activities relating to health and
34 long-term care access as specified pursuant to chapter 135,
35 division XXIV:



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 \$ 67,107
2 134,214
3 13. For continuation of an accountable care organization
4 pilot project:
5 \$ 50,000
6 100,000
7 14. For the continued development of a provider payment
8 system plan to provide recommendations to reform the health
9 care provider payment system as an effective way to promote
10 coordination of care, lower costs, and improve quality:
11 \$ 100,000
12 15. For transfer to the department of public health to
13 be used as state matching funds for the health information
14 technology system network developed by the department of public
15 health:
16 \$ 181,993
17 363,987
18 16. To supplement the appropriation for medical assistance:
19 \$ 1,956,245
20 Notwithstanding section 8.39, subsection 1, without the
21 prior written consent and approval of the governor and the
22 director of the department of management, the director of human
23 services may transfer funds among the appropriations made in
24 this section as necessary to carry out the purposes of the
25 account for health care transformation. The department shall
26 report any transfers made pursuant to this section to the
27 legislative services agency.
28 MEDICAID FRAUD FUND
29 Sec. 46. 2011 Iowa Acts, chapter 129, section 150, is
30 amended to read as follows:
31 SEC. 150. MEDICAID FRAUD ACCOUNT FUND — DEPARTMENT OF
32 HUMAN SERVICES. There is appropriated from the Medicaid fraud
33 account fund created in section 249A.7 to the department of
34 human services for the fiscal year beginning July 1, 2012, and
35 ending June 30, 2013, the following amount, or so much thereof

LSB 5118SV (3) 84

-64-

pf/jp

64/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 as is necessary, to be used for the purposes designated:

2 To supplement the appropriation made in this Act from the
3 general fund of the state to the department of human services
4 for medical assistance for the fiscal year beginning July 1,
5 2012, and ending June 30, 2013:

6 \$ 2,000,000

7 QUALITY ASSURANCE TRUST FUND

8 Sec. 47. 2011 Iowa Acts, chapter 129, section 151, is
9 amended to read as follows:

10 SEC. 151. QUALITY ASSURANCE TRUST FUND — DEPARTMENT OF
11 HUMAN SERVICES. Notwithstanding any provision to the contrary
12 and subject to the availability of funds, there is appropriated
13 from the quality assurance trust fund created in section
14 249L.4 to the department of human services for the fiscal year
15 beginning July 1, 2012, and ending June 30, 2013, the following
16 amounts, or so much thereof as is necessary for the purposes
17 designated:

18 To supplement the appropriation made in this Act from the
19 general fund of the state to the department of human services
20 for medical assistance:

21 \$ 29,000,000

22 26,500,000

23 HOSPITAL HEALTH CARE ACCESS TRUST FUND

24 Sec. 48. 2011 Iowa Acts, chapter 129, section 152, is
25 amended to read as follows:

26 SEC. 152. HOSPITAL HEALTH CARE ACCESS TRUST FUND —
27 DEPARTMENT OF HUMAN SERVICES. Notwithstanding any provision to
28 the contrary and subject to the availability of funds, there is
29 appropriated from the hospital health care access trust fund
30 created in section 249M.4 to the department of human services
31 for the fiscal year beginning July 1, 2012, and ending June
32 30, 2013, the following amounts, or so much thereof as is
33 necessary, for the purposes designated:

34 1. To supplement the appropriation made in this Act from the
35 general fund of the state to the department of human services

LSB 5118SV (3) 84

-65-

pf/jp

65/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 for medical assistance:
2 \$ ~~39,223,800~~
3 33,898,400
4 2. For deposit in the nonparticipating provider
5 reimbursement fund created in section 249J.24A to be used for
6 the purposes of the fund:
7 \$ ~~776,200~~
8 801,600

9 MISCELLANEOUS PROVISIONS

10 Sec. 49. 2011 Iowa Acts, chapter 129, section 153, is
11 amended to read as follows:
12 SEC. 153. MEDICAL ASSISTANCE PROGRAM — NONREVERSION
13 FOR FY 2012-2013. Notwithstanding section 8.33, if moneys
14 appropriated for purposes of the medical assistance program
15 for the fiscal year beginning July 1, 2012, and ending June
16 30, 2013, from the general fund of the state, the Medicaid
17 fraud account, the quality assurance trust fund, and the
18 hospital health care access trust fund, are in excess of actual
19 expenditures for the medical assistance program and remain
20 unencumbered or unobligated at the close of the fiscal year,
21 the excess moneys shall not revert but shall remain available
22 for expenditure for the purposes of the medical assistance
23 program until the close of the succeeding fiscal year.
24 Sec. 50. REPEAL. 2011 Iowa Acts, chapter 129, section 149,
25 is repealed.

26 DIVISION VI

27 CHILDREN'S HEALTH INSURANCE PROGRAM — CHILD ENROLLMENT
28 CONTINGENCY FUND

29 Sec. 51. CHILDREN'S HEALTH INSURANCE PROGRAM — CHILD
30 ENROLLMENT CONTINGENCY FUND — DIRECTIVES FOR USE OF FUNDS —
31 FY 2011-2012.
32 1. Moneys received from the federal government through
33 the child enrollment contingency fund established pursuant
34 to section 103 of the federal Children's Health Insurance
35 Program Reauthorization Act of 2009, Pub. L. No. 111-3, are

LSB 5118SV (3) 84
pf/jp

66/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 appropriated to the department of human services for the fiscal
2 year beginning July 1, 2011, and ending June 30, 2012, to be
3 used in addition to any other amounts appropriated for the same
4 purposes for the fiscal year as follows:

5 a. For adoption subsidy payments and services:
6 \$ 2,177,355

7 b. For child care programs:
8 \$ 1,212,432

9 2. Notwithstanding section 8.39, and to the extent
10 that funds appropriated in this section are unexpended or
11 unobligated for the purposes specified in subsection 1, the
12 department of human services may transfer funds within or
13 between any of the appropriations made in this section for the
14 following purposes:

15 a. For adoption subsidy payments and services.

16 b. For child care assistance.

17 Sec. 52. CHILDREN'S HEALTH INSURANCE PROGRAM — CHILD
18 ENROLLMENT CONTINGENCY FUND — DIRECTIVES FOR USE OF FUNDS —
19 FY 2012-2013.

20 1. a. Moneys received from the federal government through
21 the child enrollment contingency fund established pursuant
22 to section 103 of the federal Children's Health Insurance
23 Program Reauthorization Act of 2009, Pub. L. No. 111-3, are
24 appropriated to the department of human services for the fiscal
25 year beginning July 1, 2012, and ending June 30, 2013, to be
26 used in addition to any other amounts appropriated for the same
27 purposes for the fiscal year as follows:

28 (1) For adoption subsidy payments and services:
29 \$ 5,290,441

30 (2) For child care programs:
31 \$ 7,969,021

32 (3) For mental health and disability services redesign
33 technical assistance services:
34 \$ 500,000

35 (4) For the field operations integrity claims unit:

LSB 5118SV (3) 84

-67-

pf/jp

67/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 \$ 961,100
2 (5) For medical assistance program reimbursement and
3 associated costs:
4 \$ 4,950,428
5 (6) For lodging expenses associated with patient care
6 provided at the university of Iowa hospital and clinics under
7 chapter 249J:
8 \$ 200,000
9 The department of human services shall establish the maximum
10 number of overnight stays and the maximum rate reimbursed for
11 overnight lodging, which may be based on the state employee
12 rate established by the department of administrative services.
13 The funds allocated under this subparagraph shall not be used
14 as nonfederal share matching funds.
15 (7) For ambulance services associated with patient care
16 provided under chapter 249J:
17 \$ 200,000
18 The department of human services shall establish
19 requirements for use of funds in this subparagraph for
20 ambulance services when no other third-party payment is
21 available. The funds allocated in this subparagraph shall not
22 be used as nonfederal share matching funds.
23 (8) For the public purpose of distribution to a statewide
24 nonprofit organization consisting of low-income housing and
25 homelessness service providers, advocates, local governments,
26 lending institutions, and low-income and homeless individuals
27 to be used to empower low-income individuals and to increase
28 their access to affordable housing:
29 \$ 100,000
30 b. Notwithstanding section 8.39, and to the extent that
31 funds appropriated in this subsection are unexpended or
32 unobligated for the purposes specified in paragraph "a",
33 subparagraphs (1) and (2), for the fiscal year beginning July
34 1, 2012, the department of human services may transfer funds
35 within or between any of the appropriations made in this



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 subsection for the following purposes:

2 (1) For adoption subsidy payments and services.

3 (2) For child care assistance.

4 2. Moneys received from the federal government through
5 the child enrollment contingency fund established pursuant
6 to section 103 of the federal Children's Health Insurance
7 Program Reauthorization Act of 2009, Pub. L. No. 111-3, are
8 appropriated to the department of human services for the fiscal
9 year beginning July 1, 2012, and ending June 30, 2013, to be
10 used for audit settlements:

11 \$ 2,654,238

12 Notwithstanding section 8.33, moneys appropriated in this
13 subsection that remain unencumbered or unobligated at the close
14 of the fiscal year shall not revert to any other fund but shall
15 remain available for expenditure for the purposes designated
16 until the close of the succeeding fiscal year.

17 Sec. 53. EFFECTIVE DATE PROVISIONS. The section of this
18 division of this Act appropriating moneys received through the
19 federal Child Enrollment Contingency Fund for the fiscal year
20 beginning July 1, 2011, and ending June 30, 2012, being deemed
21 of immediate importance, take effect upon enactment.

22 Sec. 54. RETROACTIVE APPLICABILITY. The section of this
23 division of this Act appropriating moneys received through
24 the federal Child Enrollment Contingency Fund for the fiscal
25 year beginning July 1, 2011, and ending June 30, 2012, applies
26 retroactively to July 1, 2011.

27 DIVISION VII

28 MENTAL HEALTH AND DISABILITY SERVICES REDESIGN

29 Sec. 55. RISK POOL APPROPRIATION FOR MEDICAL ASSISTANCE
30 PROGRAM. All moneys remaining in the risk pool of the property
31 tax relief fund on June 30, 2012, following the distributions
32 made pursuant to 2012 Iowa Acts, Senate File 2071, are
33 appropriated to the department of human services for the fiscal
34 year beginning July 1, 2012, and ending June 30, 2013, to be
35 used for the purpose designated:

LSB 5118SV (3) 84

-69-

pf/jp

69/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 To be credited to the appropriation made for the medical
2 assistance program in 2011 Iowa Acts, chapter 129, section 122.

3 Sec. 56. MENTAL HEALTH AND DISABILITY SERVICES REDESIGN.

4 There is appropriated from the general fund of the state to
5 the department of human services for the fiscal year beginning
6 July 1, 2012, and ending June 30, 2013, the following amount,
7 or so much thereof as is necessary, to be used for the purposes
8 designated:

9 To be used as provided in additional enactments by the
10 Eighty-fourth General Assembly, 2012 Session, for redesign of
11 county-based adult mental health and disability services:
12 \$ 24,893,762

13 DIVISION VIII

14 PRIOR APPROPRIATIONS AND RELATED CHANGES

15 INJURED VETERANS GRANT PROGRAM

16 Sec. 57. 2008 Iowa Acts, chapter 1187, section 69,
17 unnumbered paragraph 1, as amended by 2009 Iowa Acts, chapter
18 182, section 83, 2010 Iowa Acts, chapter 1192, section 56, and
19 2011 Iowa Acts, chapter 129, section 53, is amended to read as
20 follows:

21 Notwithstanding section 8.33, moneys appropriated in this
22 subsection that remain unencumbered or unobligated at the close
23 of the fiscal year shall not revert but shall remain available
24 for expenditure for the purposes designated until the close of
25 the fiscal year beginning July 1, ~~2011~~ 2012.

26 CHILD WELFARE DECATEGORIZATION

27 FY 2009-2010 NONREVERSION

28 Sec. 58. 2009 Iowa Acts, chapter 182, section 14, subsection
29 5, unnumbered paragraph 2, as enacted by 2011 Iowa Acts,
30 chapter 129, section 55, is amended to read as follows:

31 Notwithstanding section 232.188, subsection 5, moneys from
32 the allocations made in this subsection or made from any other
33 source for the decategorization of child welfare and juvenile
34 justice funding initiative under section 232.188 for the fiscal
35 year beginning July 1, 2009, that are designated as carryover

LSB 5118SV (3) 84

-70-

pf/jp

70/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 funding that remain unencumbered or unobligated at the close
2 of the fiscal year beginning July 1, 2010, shall not revert
3 but shall be transferred ~~to~~ in equal amounts to the community
4 housing and services for persons with disabilities revolving
5 loan program fund created in section 16.185, as enacted by
6 this division of this 2011 Act and to the supportive and
7 residential services for individuals who meet the psychiatric
8 medical institution for children level of care competitive
9 grant program fund created in section 16.185A, as enacted by
10 this 2012 Act.

11 IOWA VETERANS HOME

12 Sec. 59. 2011 Iowa Acts, chapter 129, section 3, subsection
13 2, is amended by adding the following new paragraph:

14 NEW PARAGRAPH. d. The funds appropriated in this subsection
15 to the Iowa veterans home that remain available for expenditure
16 for the succeeding fiscal year pursuant to section 35D.18,
17 subsection 5, shall be distributed to be used in the succeeding
18 fiscal year in accordance with this lettered paragraph. The
19 first \$500,000 shall remain available to be used for the
20 purposes of the Iowa veterans home. Any remaining balance
21 shall be credited to the appropriation in this Act for the
22 fiscal year beginning July 1, 2012, for medical assistance.

23 FAMILY INVESTMENT PROGRAM — GENERAL FUND

24 Sec. 60. 2011 Iowa Acts, chapter 129, section 7, is amended
25 by adding the following new subsection:

26 NEW SUBSECTION. 5. Notwithstanding section 8.33, moneys
27 appropriated in this section that remain unencumbered or
28 unobligated at the close of the fiscal year shall not revert
29 but shall remain available for expenditure for the purposes
30 designated until the close of the succeeding fiscal year.

31 MEDICAL ASSISTANCE

32 Sec. 61. 2011 Iowa Acts, chapter 129, section 10, subsection
33 20, paragraph d, is amended to read as follows:

34 d. If the savings to the medical assistance program exceed
35 the cost, the department may transfer any savings generated

LSB 5118SV (3) 84

-71-

pf/jp

71/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 for the fiscal year due to medical assistance program cost
2 containment efforts initiated pursuant to 2010 Iowa Acts,
3 chapter 1031, Executive Order No. 20, issued December 16,
4 2009, or cost containment strategies initiated pursuant
5 to this subsection, to the ~~appropriation~~ appropriations
6 made in this division of this Act for medical contracts or
7 general administration to defray the increased contract costs
8 associated with implementing such efforts.

9 BEHAVIORAL HEALTH SERVICES ACCOUNT — MEDICAL ASSISTANCE

10 Sec. 62. 2011 Iowa Acts, chapter 129, section 10, is amended
11 by adding the following new subsection:

12 NEW SUBSECTION. 26. Notwithstanding 2009 Iowa Acts,
13 chapter 182, section 9, subsection 16, paragraph "b", as
14 amended by 2010 Iowa Acts, chapter 1192, section 63, as amended
15 by 2011 Iowa Acts, chapter 129, section 54, funds in the
16 account that remain unencumbered or unobligated at the end of
17 the fiscal year beginning July 1, 2011, are appropriated to
18 the department of human services to be used for the medical
19 assistance program for the succeeding fiscal year.

20 STATE SUPPLEMENTARY ASSISTANCE

21 Sec. 63. 2011 Iowa Acts, chapter 129, section 11, is amended
22 by adding the following new subsection:

23 NEW SUBSECTION. 4. Notwithstanding section 8.33, moneys
24 appropriated in this section that remain unencumbered or
25 unobligated at the close of the fiscal year shall not revert
26 but shall remain available for expenditure for the purposes
27 designated until the close of the succeeding fiscal year.

28 FIELD OPERATIONS

29 Sec. 64. 2011 Iowa Acts, chapter 129, section 25, is amended
30 by adding the following new unnumbered paragraph:

31 NEW UNNUMBERED PARAGRAPH. Notwithstanding section 8.33,
32 moneys appropriated in this section that remain unencumbered or
33 unobligated at the close of the fiscal year shall not revert
34 but shall remain available for expenditure for the purposes
35 designated until the close of the succeeding fiscal year.

LSB 5118SV (3) 84

-72-

pf/jp

72/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 GENERAL ADMINISTRATION

2 Sec. 65. 2011 Iowa Acts, chapter 129, section 26, is amended
3 by adding the following new subsection:

4 NEW SUBSECTION. 6. Notwithstanding section 8.33, moneys
5 appropriated in this section that remain unencumbered or
6 unobligated at the close of the fiscal year shall not revert
7 but shall remain available for expenditure for the purposes
8 designated until the close of the succeeding fiscal year.

9 IOWACARE DISTRIBUTIONS

10 Sec. 66. 2011 Iowa Acts, chapter 129, section 35, subsection
11 4, paragraph a, is amended to read as follows:

12 a. Notwithstanding any provision of law to the contrary,
13 the amount appropriated in this subsection shall be distributed
14 based on claims submitted, adjudicated, and paid by the Iowa
15 Medicaid enterprise plus a monthly disproportionate share
16 hospital payment. Any amount appropriated in this subsection
17 in excess of ~~\$60,000,000~~ \$56,500,000 shall be distributed only
18 if the sum of the expansion population claims adjudicated
19 and paid by the Iowa Medicaid enterprise plus the estimated
20 disproportionate share hospital payments exceeds ~~\$60,000,000~~
21 \$56,500,000. The amount paid in excess of ~~\$60,000,000~~
22 \$56,500,000 shall not adjust the original monthly payment
23 amount but shall be distributed monthly based on actual claims
24 adjudicated and paid by the Iowa Medicaid enterprise plus
25 the estimated disproportionate share hospital amount. Any
26 amount appropriated in this subsection in excess of ~~\$60,000,000~~
27 \$56,500,000 shall be allocated only if federal funds are
28 available to match the amount allocated. Pursuant to paragraph
29 "b", of the amount appropriated in this subsection, not more
30 than \$4,000,000 shall be distributed for prescription drugs and
31 podiatry services.

32 Sec. 67. 2011 Iowa Acts, chapter 129, section 35, subsection
33 4, paragraph d, subparagraph (2), is amended to read as
34 follows:

35 (2) Notwithstanding the amount collected and distributed

LSB 5118SV (3) 84

-73-

pf/jp

73/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 for deposit in the IowaCare account pursuant to section
2 249J.24, subsection 4, paragraph "a", subparagraph (2),
3 the first \$19,000,000 in collections pursuant to section
4 347.7 between January 1, 2012, and June 30, 2012, shall be
5 distributed to the treasurer of state for deposit in the
6 IowaCare account and collections during this time period in
7 excess of \$19,000,000 shall be distributed to the acute care
8 teaching hospital identified in this subsection. ~~Of the~~
9 ~~collections in excess of the \$19,000,000 received by the acute~~
10 ~~care teaching hospital under this subparagraph (2), \$2,000,000~~
11 ~~shall be distributed by the acute care teaching hospital to the~~
12 ~~treasurer of state for deposit in the IowaCare account in the~~
13 ~~month of July 2012, following the January 1 through June 30,~~
14 ~~2012, period.~~

15 Sec. 68. IMMEDIATE EFFECTIVE DATE. This division of this
16 Act, being deemed of immediate importance, takes effect upon
17 enactment.

18 Sec. 69. RETROACTIVE APPLICABILITY. The following sections
19 of this division of this Act apply retroactively to July 1,
20 2011:

21 1. The section relating to the transfer of funds from costs
22 savings under the medical assistance program to appropriations
23 for medical contracts or general administration for the fiscal
24 year beginning July 1, 2011, and ending June 30, 2012.

25 2. The section relating to the nonreversion of
26 decategorization of child welfare and juvenile justice funds.

27 3. The section relating to the distribution of IowaCare
28 program funds.

29 DIVISION IX

30 MISCELLANEOUS

31 Sec. 70. NEW SECTION. 16.185A Supportive and residential
32 services for individuals who meet the psychiatric medical
33 institution for children level of care — competitive grant
34 program fund.

35 1. A supportive and residential services competitive

LSB 5118SV (3) 84

-74-

pf/jp

74/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 grant program fund is created within the authority to further
2 the availability of supportive and residential services for
3 individuals who meet the psychiatric medical institution
4 for children level of care under the medical assistance
5 program. The moneys in the fund are annually appropriated to
6 the authority to be used for the development and operation
7 of a competitive grant program to provide financing to
8 construct supportive housing or develop the infrastructure
9 in which to provide supportive services, including through
10 new construction, acquisition and rehabilitation of existing
11 housing or infrastructure, or conversion or adaptive reuse.
12 2. Moneys transferred by the authority for deposit in the
13 competitive grant program fund, moneys appropriated to the
14 competitive grant program, and any other moneys available to
15 and obtained or accepted by the authority for placement in the
16 fund shall be credited to the fund. Additionally, payment of
17 interest, recaptures of awards, and other repayments to the
18 fund shall be credited to the fund. Notwithstanding section
19 12C.7, subsection 2, interest or earnings on moneys in the fund
20 shall be credited to the fund. Notwithstanding section 8.33,
21 moneys credited to the fund from any other fund that remain
22 unencumbered or unobligated at the close of the fiscal year
23 shall not revert to the other fund.
24 3. The authority shall annually allocate moneys available
25 in the fund for the development of supportive housing or the
26 infrastructure in which to provide supportive services for
27 individuals who meet the psychiatric medical institution for
28 children level of care under the medical assistance program.
29 Moneys allocated to such projects shall be in the form of
30 competitive grants. An application submitted shall contain a
31 commitment of at least a dollar-for-dollar match of the grant
32 assistance.
33 4. a. A project shall demonstrate written approval of the
34 project by the department of human services to the authority
35 prior to application for funding under this section.

LSB 5118SV (3) 84

-75-

pf/jp

75/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 **b.** In order to be approved by the department of human
2 services for application for funding under this section, a
3 project shall include all of the following components:

4 (1) Provision of services to individuals who meet the
5 psychiatric medical institution for children level of care
6 under the medical assistance program.

7 (2) Policies and procedures that prohibit discharge of the
8 individual from the services provided by the project provider
9 unless an alternative placement that is acceptable to the
10 client or the client's guardian is identified.

11 5. Housing provided through a project under this section is
12 exempt from the requirements of chapter 1350.

13 6. The authority, in collaboration with the department of
14 human services, shall adopt rules pursuant to chapter 17A to
15 administer this section.

16 Sec. 71. Section 97B.39, Code 2011, is amended to read as
17 follows:

18 **97B.39 Rights not transferable or subject to legal process**
19 **— exceptions.**

20 The right of any person to any future payment under this
21 chapter is not transferable or assignable, at law or in
22 equity, and the moneys paid or payable or rights existing
23 under this chapter are not subject to execution, levy,
24 attachment, garnishment, or other legal process, or to the
25 operation of any bankruptcy or insolvency law except for the
26 purposes of enforcing child, spousal, or medical support
27 obligations or marital property orders, or for recovery of
28 medical assistance payments pursuant to section 249A.5. For
29 the purposes of enforcing child, spousal, or medical support
30 obligations, the garnishment or attachment of or the execution
31 against compensation due a person under this chapter shall
32 not exceed the amount specified in 15 U.S.C. § 1673(b).
33 The system shall comply with the provisions of a marital
34 property order requiring the selection of a particular benefit
35 option, designated beneficiary, or contingent annuitant if

LSB 5118SV (3) 84

-76-

pf/jp

76/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 the selection is otherwise authorized by this chapter and
2 the member has not received payment of the member's first
3 retirement allowance. However, a marital property order shall
4 not require the payment of benefits to an alternative payee
5 prior to the member's retirement, prior to the date the member
6 elects to receive a lump sum distribution of accumulated
7 contributions pursuant to section 97B.53, or in an amount that
8 exceeds the benefits the member would otherwise be eligible to
9 receive pursuant to this chapter.

10 Sec. 72. Section 135.11, Code Supplement 2011, is amended by
11 adding the following new subsection:

12 NEW SUBSECTION. 31. Administer a public awareness program
13 for human papillomavirus infection vaccination by identifying
14 medically accurate materials that contain information regarding
15 the risks associated with the various forms of the infection
16 in causing cervical cancer, and any other diseases for which
17 the department may recommend immunization or immunization
18 information, and the availability, effectiveness, and potential
19 risks of those vaccines. The department shall make the
20 identified materials available on the department's internet
21 site, provide education and training to health professionals
22 and the general public regarding the vaccines, and notify
23 each school district in the state of the availability of the
24 information. For the purposes of this subsection, "human
25 papillomavirus" means the group of viruses identified by the
26 centers for disease control and prevention of the United States
27 department of health and human services.

28 Sec. 73. Section 135H.10, subsection 3, Code 2011, is
29 amended by striking the subsection.

30 Sec. 74. Section 144D.4, as enacted by 2012 Iowa Acts, House
31 File 2165, section 5, is amended by adding the following new
32 subsection:

33 NEW SUBSECTION. 10. A POST form executed between July 1,
34 2008, and June 30, 2012, as part of the patient autonomy in
35 health care decisions pilot project created pursuant to 2008

LSB 5118SV (3) 84

-77-

pf/jp

77/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Iowa Acts, chapter 1188, section 36, as amended by 2010 Iowa
2 Acts, chapter 1192, section 58, shall remain effective until
3 revoked or until a new POST form is executed pursuant to this
4 chapter.

5 Sec. 75. Section 225B.8, Code Supplement 2011, is amended
6 to read as follows:

7 **225B.8 Repeal.**

8 This chapter is repealed July 1, ~~2012~~ 2017.

9 Sec. 76. NEW SECTION. **231.45 Certified volunteer long-term**
10 **care resident's advocate program.**

11 1. The department shall establish a certified volunteer
12 long-term care resident's advocate program in accordance with
13 the federal Act to provide assistance to the state and local
14 long-term care resident's advocates.

15 2. The department shall develop and implement a
16 certification process for volunteer long-term care resident's
17 advocates including but not limited to an application process,
18 provision for background checks, classroom or on-site training,
19 orientation, and continuing education.

20 3. The provisions of section 231.42 relating to local
21 long-term care resident's advocates shall apply to certified
22 volunteer long-term care resident's advocates.

23 4. The department shall adopt rules pursuant to chapter 17A
24 to administer this section.

25 Sec. 77. Section 453A.35, Code Supplement 2011, is amended
26 to read as follows:

27 **453A.35 Tax and fees paid to general fund — standing**
28 **appropriation to health care trust fund.**

29 1. ~~a. With the exception of revenues credited to the health~~
30 ~~care trust fund pursuant to paragraph "b", the~~ The proceeds
31 derived from the sale of stamps and the payment of taxes, fees,
32 and penalties provided for under this chapter, and the permit
33 fees received from all permits issued by the department, shall
34 be credited to the ~~general fund of the state.~~

35 ~~b. Of the revenues generated from the tax on cigarettes~~

LSB 5118SV (3) 84

-78-

pf/jp

78/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 ~~pursuant to section 453A.6, subsection 1, and from the tax on~~
2 ~~tobacco products as specified in section 453A.43, subsections~~
3 ~~1, 2, 3, and 4, the first one hundred six million sixteen~~
4 ~~thousand four hundred dollars shall be credited to the health~~
5 ~~care trust fund created in section 453A.35A.~~

6 2. All permit fees provided for in this chapter and
7 collected by cities in the issuance of permits granted by the
8 cities shall be paid to the treasurer of the city where the
9 permit is effective, or to another city officer as designated
10 by the council, and credited to the general fund of the city.
11 Permit fees so collected by counties shall be paid to the
12 county treasurer.

13 Sec. 78. Section 453A.35A, subsection 1, Code Supplement
14 2011, is amended to read as follows:

15 1. A health care trust fund is created in the office of
16 the treasurer of state. The fund consists of the revenues
17 ~~generated from the tax on cigarettes pursuant to section~~
18 ~~453A.6, subsection 1, and from the tax on tobacco products~~
19 ~~as specified in section 453A.43, subsections 1, 2, 3, and 4,~~
20 ~~that are credited to the health care trust fund, annually,~~
21 pursuant to section 453A.35 derived from the sale of stamps
22 and the payment of taxes, fees, and penalties provided for
23 under this chapter, and the permit fees received from all
24 permits issued by the department. Moneys in the fund shall be
25 separate from the general fund of the state and shall not be
26 considered part of the general fund of the state. However, the
27 fund shall be considered a special account for the purposes
28 of section 8.53 relating to generally accepted accounting
29 principles. Moneys in the fund shall be used only as specified
30 in this section and shall be appropriated only for the uses
31 specified. Moneys in the fund are not subject to section 8.33
32 and shall not be transferred, used, obligated, appropriated,
33 or otherwise encumbered, except as provided in this section.
34 Notwithstanding section 12C.7, subsection 2, interest or
35 earnings on moneys deposited in the fund shall be credited to

LSB 5118SV (3) 84

-79-

pf/jp

79/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 the fund.

2 DIVISION X

3 DIRECT CARE PROFESSIONALS

4 Sec. 79. NEW SECTION. 152F.1 Definitions.

5 As used in this chapter, unless the context otherwise
6 requires:

7 1. *"Board"* means the board of direct care professionals
8 created under chapter 147.

9 2. *"Community living professional"* means a direct care
10 associate who has completed advanced training and is certified
11 to provide home and community living, instrumental activities
12 of daily living, and personal support services.

13 3. *"Direct care associate"* means an individual who has
14 completed core training and is certified to provide direct care
15 services in the state.

16 4. *"Direct care instructor"* means an individual approved
17 by the board to provide direct care instruction to direct care
18 professionals.

19 5. *"Direct care professional"* means an individual who
20 provides direct care services for compensation and is a direct
21 care associate, a community living professional, a health
22 support professional, or a personal support professional.

23 6. *"Direct care services"* means the services provided to
24 individuals who are ill or individuals with disabilities as
25 specified in the individual's service plan or in documented
26 goals, including but not limited to home and community living
27 services, instrumental activities of daily living services,
28 personal activities of daily living services, personal support
29 services, and health monitoring and maintenance services.

30 7. *"Direct care trainer"* means a direct care instructor who
31 is approved by the board to train instructors.

32 8. *"Health monitoring and maintenance services"* means
33 medically-oriented services that assist an individual in
34 maintaining the individual's health including measuring intake
35 and output; providing catheter and ostomy care; collecting

LSB 5118SV (3) 84

-80-

pf/jp

80/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 specimens; checking vital signs, including temperature, pulse,
2 respiration, and blood pressure; measuring height and weight;
3 performing range of motion exercises; providing assistance with
4 urinary care; and application of thrombo embolic deterrent hose
5 or hot and cold packs.

6 9. *"Health support professional"* means a direct care
7 associate who has completed advanced training and is certified
8 to provide personal activities of daily living and health
9 monitoring and maintenance services or a direct care associate
10 who has met the federal nurse aide requirements pursuant to 42
11 C.F.R. § 483.152.

12 10. *"Home and community living services"* means services to
13 enhance or maintain independence of individuals including such
14 activities as helping individuals develop and meet personal
15 goals, providing direct physical and emotional support and
16 assistance for persons with disabilities, utilizing crisis
17 intervention and positive behavior supports, and using and
18 following individual support plans.

19 11. *"Instrumental activities of daily living services"* means
20 services provided to assist individuals with daily living tasks
21 to allow them to function independently in a home or community
22 setting, including but not limited to assistance with managing
23 money, transportation, light housekeeping, and shopping and
24 cooking.

25 12. *"Personal activities of daily living services"* means
26 services to assist individuals in meeting basic needs,
27 including but not limited to bathing, back rubs, and skin care;
28 grooming activities; assistance with dressing and undressing;
29 assistance with eating and feeding; assistance with toileting;
30 and assistance with mobility, including transfers, walking, and
31 turning in bed.

32 13. *"Personal support professional"* means a direct care
33 associate who has completed advanced training and is certified
34 to provide instrumental activities of daily living, personal
35 activities of daily living, and personal support services.

LSB 5118SV (3) 84

-81-

pf/jp

81/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 14. "*Personal support services*" means support services
2 provided to an individual as the individual performs personal
3 activities of daily living including but not limited to
4 coaching and prompting, and teaching skills and behaviors.

5 15. "*Service plan*" means a written, consumer-centered,
6 outcome-based plan of services.

7 16. "*Specialty endorsement*" means an advanced level of
8 certification based on requirements developed by experts in a
9 particular discipline or professional area and approved by the
10 board.

11 Sec. 80. NEW SECTION. 152F.2 Certification required —
12 exceptions — use of title.

13 1. Unless otherwise exempt under section 152F.4, beginning
14 January 1, 2014, an individual shall not provide direct care
15 services in this state without being certified as a direct care
16 associate.

17 2. An individual who is not certified pursuant to this
18 chapter shall not use words or titles which imply or represent
19 that the individual is certified as a direct care professional
20 under this chapter.

21 3. A direct care associate shall not act as or represent
22 that the individual is a direct care professional with advanced
23 training certification or a specialty endorsement, unless the
24 direct care associate is first certified at the appropriate
25 level of certification under this chapter.

26 4. Notwithstanding any provision to the contrary, an
27 individual who completes advanced training or meets the
28 requirements for a specialty endorsement is not required to
29 be certified at that level if the individual does not act as
30 or represent that the individual is certified at that level.
31 Section 147.83 does not apply to a direct care associate who
32 is not certified as a direct care professional with advanced
33 training certification or a specialty endorsement if the direct
34 care associate does not act as or represent that the individual
35 is certified at that level.

LSB 5118SV (3) 84

-82-

pf/jp

82/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Sec. 81. NEW SECTION. 152F.3 Requirements to obtain
2 certification — renewal — continuing education — reciprocity.
3 1. An applicant for certification as a direct care associate
4 shall present evidence satisfactory to the board that the
5 applicant meets all of the following requirements:
6 a. The applicant has successfully completed the required
7 education for the certification from a board-approved direct
8 care instructor or direct care trainer.
9 b. The applicant has paid all fees required by the board.
10 c. The applicant certifies that the applicant will conduct
11 all professional activities in accordance with standards for
12 professional conduct established by the board.
13 2. An applicant for certification as a direct care
14 professional with advanced training or a specialty endorsement
15 shall present evidence satisfactory to the board that the
16 applicant meets all of the following requirements:
17 a. The applicant has successfully completed the required
18 education for the certification from a board-approved direct
19 care instructor or direct care trainer.
20 b. The applicant has paid all fees required by the board.
21 c. The applicant has passed a state examination approved by
22 the board.
23 d. The applicant certifies that the applicant will conduct
24 all professional activities in accordance with standards for
25 professional conduct established by the board.
26 3. An individual shall renew the individual's certification
27 biennially. Prior to such renewal, the individual shall
28 present evidence that the individual has satisfied continuing
29 education requirements and shall pay a renewal fee as
30 determined by the board.
31 4. The board shall issue the appropriate certification to an
32 applicant who demonstrates experience in direct care services
33 in another state and meets the requirements established by the
34 board for the specific certification.
35 Sec. 82. NEW SECTION. 152F.4 Scope of chapter.

LSB 5118SV (3) 84

-83-

pf/jp

83/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 1. The provisions of this chapter do not apply to any of the
2 following:

3 a. An individual who is providing direct care services
4 and is governed by a collective bargaining agreement in place
5 before July 1, 2017, until the expiration of such agreement.

6 b. An individual providing direct care services to a family
7 member.

8 c. An individual otherwise licensed who is operating within
9 the scope of that license and who does not represent to the
10 public that the individual is a direct care professional.

11 2. This chapter shall not be interpreted to preclude
12 an individual who provides direct care services but is not
13 otherwise required to be certified under this chapter from
14 being certified under this chapter on a voluntary basis.

15 Sec. 83. NEW SECTION. 152F.5 Duties of the board.

16 The board shall do all of the following:

17 1. Adopt rules consistent with this chapter, chapter 147,
18 chapter 272, and the recommendations of the direct care worker
19 advisory council established pursuant to 2008 Iowa Acts,
20 chapter 69, which are necessary for the performance of its
21 duties.

22 2. Adopt rules to provide a transition process that allows
23 individuals providing direct care services on or before January
24 1, 2014, who are subject to the certification requirements
25 of this chapter, to continue providing direct care services
26 while completing certification under this chapter. The rules
27 shall provide that certification requirements for an individual
28 subject to the transition process are based on consideration
29 of previous training, employment history, and experience. An
30 individual subject to the transition process shall complete the
31 requirements for direct care associate certification within a
32 time frame determined by rule of the board.

33 3. Establish curriculum requirements for health support
34 professionals. The curriculum requirements established shall
35 not exceed the curriculum requirements specified for nurse

LSB 5118SV (3) 84

-84-

pf/jp

84/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 aides pursuant to 42 C.F.R. § 483.152, without prior approval
2 of sixty percent of the members of the board and prior approval
3 of the department of inspections and appeals.

4 4. Require an individual to undergo criminal history
5 and child and dependent adult abuse record checks prior
6 to certification, and establish record checks requirements
7 applicable to direct care professionals consistent with section
8 135C.33.

9 5. Establish dependent adult abuse reporting and training
10 requirements consistent with chapters 235B and 235E, as
11 applicable.

12 6. Establish standards and guidelines for certification
13 reciprocity.

14 7. Establish standards and guidelines for direct care
15 professionals, including minimum curriculum requirements.

16 8. Prepare and conduct, or prescribe, an examination for
17 applicants for certification.

18 9. Establish standards and guidelines for direct care
19 instructors and direct care trainers, including minimum
20 curriculum requirements and continuing education requirements.
21 Training and continuing education guidelines shall provide
22 diverse options for completion of the training and continuing
23 education, as appropriate, including but not limited to online,
24 employer-based, or educational institution-based opportunities.

25 10. Define educational activities which fulfill continuing
26 education requirements for renewal of certification.

27 11. Establish guidelines for inactive certification status
28 and inactive certification reentry.

29 Sec. 84. NEW SECTION. 152F.6 Certification suspension and
30 revocation.

31 A certification issued by the board under this chapter may be
32 suspended or revoked, or renewal of certification may be denied
33 by the board, for violation of any provision of this chapter,
34 section 147.55 or 272C.10, or rules adopted by the board.

35 Sec. 85. Section 10A.402, subsection 1, Code 2011, is

LSB 5118SV (3) 84

-85-

pf/jp

85/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 amended to read as follows:

2 1. Investigations relative to the practice of regulated
3 professions and occupations, except those within the
4 jurisdiction of the board of medicine, the board of pharmacy,
5 the dental board, ~~and the board of nursing, and the board of~~
6 direct care professionals.

7 Sec. 86. Section 135.11A, Code 2011, is amended to read as
8 follows:

9 **135.11A Professional licensure division — other licensing**
10 **boards — expenses — fees.**

11 1. There shall be a professional licensure division within
12 the department of public health. Each board under chapter 147
13 or under the administrative authority of the department, except
14 the board of nursing, board of medicine, dental board, ~~and~~
15 board of pharmacy, and board of direct care professionals shall
16 receive administrative and clerical support from the division
17 and may not employ its own support staff for administrative and
18 clerical duties.

19 2. The professional licensure division and the licensing
20 boards may expend funds in addition to amounts budgeted, if
21 those additional expenditures are directly the result of actual
22 examination and exceed funds budgeted for examinations. Before
23 the division or a licensing board expends or encumbers an
24 amount in excess of the funds budgeted for examinations, the
25 director of the department of management shall approve the
26 expenditure or encumbrance. Before approval is given, the
27 department of management shall determine that the examination
28 expenses exceed the funds budgeted by the general assembly
29 to the division or board and the division or board does not
30 have other funds from which examination expenses can be paid.
31 Upon approval of the department of management, the division
32 or licensing board may expend and encumber funds for excess
33 examination expenses. The amounts necessary to fund the excess
34 examination expenses shall be collected as fees from additional
35 examination applicants and shall be treated as repayment

LSB 5118SV (3) 84

-86-

pf/jp

86/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 receipts as defined in section 8.2.

2 Sec. 87. Section 135.31, Code 2011, is amended to read as
3 follows:

4 135.31 Location of boards — rulemaking.

5 The offices for the board of medicine, the board of pharmacy,
6 the board of nursing, ~~and~~ the dental board, and the board
7 of direct care professionals shall be located within the
8 department of public health. The individual boards shall have
9 policymaking and rulemaking authority.

10 Sec. 88. Section 147.1, subsections 3 and 6, Code 2011, are
11 amended to read as follows:

12 3. “*Licensed*” or “*certified*”, when applied to a physician
13 and surgeon, podiatric physician, osteopathic physician and
14 surgeon, physician assistant, psychologist, chiropractor,
15 nurse, dentist, dental hygienist, dental assistant,
16 optometrist, speech pathologist, audiologist, pharmacist,
17 physical therapist, physical therapist assistant, occupational
18 therapist, occupational therapy assistant, respiratory care
19 practitioner, practitioner of cosmetology arts and sciences,
20 practitioner of barbering, funeral director, dietitian, marital
21 and family therapist, mental health counselor, social worker,
22 massage therapist, athletic trainer, acupuncturist, nursing
23 home administrator, hearing aid dispenser, ~~or~~ sign language
24 interpreter or transliterator, or direct care professional
25 means a person licensed under this subtitle.

26 6. “*Profession*” means medicine and surgery, podiatry,
27 osteopathic medicine and surgery, practice as a physician
28 assistant, psychology, chiropractic, nursing, dentistry,
29 dental hygiene, dental assisting, optometry, speech pathology,
30 audiology, pharmacy, physical therapy, physical therapist
31 assisting, occupational therapy, occupational therapy
32 assisting, respiratory care, cosmetology arts and sciences,
33 barbering, mortuary science, marital and family therapy, mental
34 health counseling, social work, dietetics, massage therapy,
35 athletic training, acupuncture, nursing home administration,

LSB 5118SV (3) 84

-87-

pf/jp

87/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 hearing aid dispensing, ~~or~~ sign language interpreting or
2 transliterating, or practice as a direct care professional.

3 Sec. 89. Section 147.2, subsection 1, Code 2011, is amended
4 to read as follows:

5 1. A person shall not engage in the practice of medicine
6 and surgery, podiatry, osteopathic medicine and surgery,
7 psychology, chiropractic, physical therapy, physical therapist
8 assisting, nursing, dentistry, dental hygiene, dental
9 assisting, optometry, speech pathology, audiology, occupational
10 therapy, occupational therapy assisting, respiratory care,
11 pharmacy, cosmetology arts and sciences, barbering, social
12 work, dietetics, marital and family therapy or mental health
13 counseling, massage therapy, mortuary science, athletic
14 training, acupuncture, nursing home administration, hearing aid
15 dispensing, or sign language interpreting or transliterating,
16 or shall not practice as a physician assistant or as a direct
17 care professional, unless the person has obtained a license for
18 that purpose from the board for the profession.

19 Sec. 90. Section 147.13, Code 2011, is amended by adding the
20 following new subsection:

21 NEW SUBSECTION. 24. For direct care professionals, the
22 board of direct care professionals.

23 Sec. 91. Section 147.14, subsection 1, Code 2011, is amended
24 by adding the following new paragraph:

25 NEW PARAGRAPH. x. For the board of direct care
26 professionals, a total of eleven members, six of whom are
27 direct care professionals who represent diverse settings and
28 populations served, two members of the public, one registered
29 nurse who serves as a direct care instructor, one human
30 services professional who serves as a direct care instructor,
31 and one licensed nursing home administrator.

32 Sec. 92. Section 147.74, Code 2011, is amended by adding the
33 following new subsection:

34 NEW SUBSECTION. 24. A direct care professional certified
35 under chapter 152F and this chapter may use the following:

LSB 5118SV (3) 84

-88-

pf/jp

88/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 *a.* A direct care professional certified as a direct care
2 associate may use the title "direct care associate" or the
3 letters "D.C.A." after the person's name.

4 *b.* A direct care professional certified as a community
5 living professional may use the title "community living
6 professional" or the letters "C.L.P." after the person's name.

7 *c.* A direct care professional certified as a personal
8 support professional may use the title "personal support
9 professional" or the letters "P.S.P." after the person's name.

10 *d.* A direct care professional certified as a health support
11 professional may use the title "health support professional" or
12 the letters "H.S.P." after the person's name.

13 *e.* A direct care professional certified with a specialty
14 endorsement may use the title or letters determined by the
15 specialty endorsement entity and approved by the board of
16 direct care professionals.

17 *f.* A direct care professional who complies with federal
18 nurse aide requirements pursuant to 42 C.F.R. § 483.152 may use
19 the title "certified nursing assistant" or the letters "C.N.A."
20 after the person's name.

21 Sec. 93. Section 147.80, subsection 3, Code 2011, is amended
22 to read as follows:

23 3. The board of medicine, the board of pharmacy, the dental
24 board, ~~and~~ the board of nursing, and the board of direct care
25 professionals shall retain individual executive officers, but
26 shall make every effort to share administrative, clerical, and
27 investigative staff to the greatest extent possible.

28 Sec. 94. Section 147.88, Code 2011, is amended to read as
29 follows:

30 **147.88 Inspections and investigations.**

31 The department of inspections and appeals may perform
32 inspections and investigations as required by this subtitle,
33 except inspections and investigations for the board of
34 medicine, board of pharmacy, board of nursing, ~~and~~ the dental
35 board, and the board of direct care professionals. The

LSB 5118SV (3) 84

-89-

pf/jp

89/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 department of inspections and appeals shall employ personnel
2 related to the inspection and investigative functions.

3 Sec. 95. Section 272C.1, subsection 6, Code 2011, is amended
4 by adding the following new paragraph:

5 NEW PARAGRAPH. *ag.* The board of direct care professionals,
6 created pursuant to chapter 147.

7 Sec. 96. TRANSITION PROVISIONS.

8 1. An individual providing direct care services on or
9 before January 1, 2014, who is subject to the certification
10 requirements of this division of this Act, may continue
11 providing direct care services while completing certification
12 as required under this division of this Act. The board of
13 direct care professionals shall adopt rules to provide that
14 certification requirements for an individual subject to the
15 transition process are based on consideration of previous
16 training, employment history, and experience, and require
17 such individuals to complete the requirements for direct care
18 associate certification within the time frame determined by
19 rule of the board.

20 2. An individual who is registered on or before January
21 1, 2014, on the Iowa direct care worker registry established
22 by the department of inspections and appeals, is deemed to
23 meet the certification requirements for a health support
24 professional under this division of this Act.

25 3. Notwithstanding sections 147.14 and 147.16, for the
26 initial board of direct care professionals, the governor may
27 appoint, subject to confirmation by the senate, in lieu of the
28 six members required to be direct care professionals and the
29 two members required to be direct care instructors, members
30 with experience and expertise that is substantially equivalent
31 to the professional requirements for a direct care professional
32 or direct care instructor, as applicable.

33 Sec. 97. IMPLEMENTATION. The provisions of this division of
34 this Act shall be implemented as follows:

35 1. The sections of this division of this Act relating to



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 the board of direct care professionals including sections
2 152F.1 and 152F.5, as enacted in this division of this Act;
3 sections 10A.402, 135.11A, 135.31, 147.13, 147.14, 147.80,
4 147.88, and 272C.1, as amended in this division of this Act,
5 and as specified in the transition provisions; and the section
6 of this division of this Act providing transition provisions
7 relating to the board shall be implemented so that a board of
8 direct care professionals is appointed no later than December
9 15, 2012.

10 2. The sections of this division of this Act relating to
11 requirements for certification of direct care professionals
12 including sections 152F.2, 152F.3, 152F.4, and 152F.6, as
13 enacted in this division of this Act; and sections 147.1,
14 147.2, and 147.74, as amended in this division of this Act,
15 shall be implemented so that the requirements are applicable
16 beginning no later than January 1, 2014.

17 Sec. 98. FUNDING PROVISIONS.

18 1. The department of public health shall limit the indirect
19 service charge for the board of direct care professionals to
20 not more than fifteen percent.

21 2. It is the intent of the general assembly that the board
22 of direct care professionals be self-sustaining by January 1,
23 2017.

24 Sec. 99. EFFECTIVE UPON ENACTMENT. This division of this
25 Act, being deemed of immediate importance, takes effect upon
26 enactment.

27 EXPLANATION

28 This bill relates to appropriations for health and human
29 services for fiscal year 2012-2013 to the department of
30 veterans affairs, the Iowa veterans home, the department on
31 aging, the department of public health, Iowa finance authority,
32 state board of regents, department of inspections and appeals,
33 and the department of human services. The appropriations were
34 previously enacted in 2011 Iowa Acts, chapter 129 (H.F. 649).
35 The bill is organized into divisions.

LSB 5118SV (3) 84

-91-

pf/jp

91/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 DEPARTMENT ON AGING. This division amends appropriations
2 made from the general fund of the state for the department on
3 aging.

4 DEPARTMENT OF PUBLIC HEALTH. This division amends
5 appropriations made from the general fund of the state for the
6 department of public health.

7 DEPARTMENT OF VETERANS AFFAIRS. This division amends
8 appropriations made from the general fund of the state for the
9 department of veterans affairs.

10 DEPARTMENT OF HUMAN SERVICES. This division amends
11 appropriations made from the general fund of the state and the
12 federal temporary assistance for needy families block grant to
13 the department of human services (DHS). The allocation for the
14 family development and self-sufficiency grant program is made
15 directly to the department of human rights.

16 Appropriations are made from the health care trust fund for
17 the medical assistance (Medicaid) program in addition to the
18 general fund appropriations made for this purpose.

19 The reimbursement section addresses reimbursement for
20 providers reimbursed by the department of human services.

21 HEALTH CARE ACCOUNTS AND FUNDS. This division amends
22 appropriations made for fiscal year 2012-2013.

23 The appropriation from the pharmaceutical settlement account
24 to the department of human services supplements the Medicaid
25 program medical contracts appropriation.

26 The appropriations from the IowaCare account are made to
27 the state board of regents for distribution to the university
28 of Iowa hospitals and clinics and to the department of human
29 services for distribution to a publicly owned acute care
30 teaching hospital in a county with a population over 350,000
31 related to the IowaCare program and indigent care.

32 The appropriation from the nonparticipating provider
33 reimbursement fund is made to the department of human services
34 to reimburse nonparticipating providers under the IowaCare
35 program.



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 The appropriations to the department of human services from
2 the account for health care transformation are directed to
3 various health care reform initiatives.

4 The appropriation from the Medicaid fraud fund is made to
5 the department of inspections and appeals for costs relating to
6 assisted living programs and adult day care services.

7 The appropriations made to supplement the Medicaid program
8 are from the following funds and account: quality assurance
9 trust fund, hospital health care access trust fund, and
10 Medicaid fraud fund.

11 The division provides that if the total amounts appropriated
12 from all sources for the medical assistance program for fiscal
13 year 2012-2013 exceed the amount needed, the excess remains
14 available to be used for the program in the succeeding fiscal
15 year.

16 MENTAL HEALTH AND DISABILITY SERVICES REDESIGN. This
17 division addresses appropriations associated with redesign of
18 mental health and disability services redesign.

19 PRIOR APPROPRIATIONS AND RELATED CHANGES. This division
20 revises appropriations and related provisions involving
21 previous fiscal years. The division takes effect upon
22 enactment.

23 CHILDREN'S HEALTH INSURANCE PROGRAM — CHILD ENROLLMENT
24 CONTINGENCY FUND. This division makes appropriations provided
25 through the federal child enrollment contingency fund to the
26 department of human services for fiscal years 2011-2012 and
27 2012-2013. The section making appropriations for fiscal year
28 2011-2012 takes effect upon enactment and is retroactively
29 applicable to July 1, 2011.

30 MISCELLANEOUS. This division provides miscellaneous
31 statutory amendments.

32 New Code section 16.185A creates a competitive grant program
33 and fund to further the availability of residential services
34 for individuals who meet the psychiatric medical institution
35 for children level of care.



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 Code section 97B.39, relating to Iowa public employees'
2 retirement system (IPERS) payments, is amended to include
3 recovery of Medicaid program payments related to estate
4 recovery in the list of exceptions that allow IPERS payments
5 to be subject to execution, levy, attachment, garnishment,
6 or other legal process, or to the operation of bankruptcy or
7 insolvency law.

8 Code section 135.11, relating to the duties of the director
9 of public health, is amended to add new subsection 31,
10 requiring the director to administer a public awareness program
11 for human papillomavirus infection vaccination.

12 Code section 135H.10, relating to administrative rules
13 addressing psychiatric medical institutions for children
14 (PMICs) is amended to strike a prohibition against the
15 department of human services including services provided by
16 PMICs in any managed care contract.

17 Code section 144D.4, as enacted by 2012 Iowa Acts, House File
18 2165, section 5, is amended to allow physician orders for scope
19 of treatment executed under a pilot project to remain effective
20 until revoked or until a new form is executed.

21 Code section 225B.8, relating to the prevention of
22 disabilities council, is amended to extend the repeal of the
23 council from July 1, 2012, until July 1, 2017.

24 Code section 231.45 is enacted to direct the department
25 on aging to establish a certified volunteer long-term care
26 resident's advocate program.

27 Code sections 453A.35 and 453A.35A are amended to provide
28 that all of the proceeds derived from the sale of stamps and
29 the payment of taxes, fees, and penalties under Code chapter
30 453A (cigarette and tobacco taxes) and from permits issued by
31 the department of revenue are to be credited to the health care
32 trust fund rather than the general fund of the state.

33 DIRECT CARE PROFESSIONALS. This division establishes a
34 board of direct care professionals within the department of
35 public health and provides for certification of direct care

LSB 5118SV (3) 84

-94-

pf/jp

94/95



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2336

1 professionals in the state.



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

Senate File 2337 - Introduced

SENATE FILE 2337
BY COMMITTEE ON WAYS AND MEANS

(SUCCESSOR TO SF 2230)

A BILL FOR

1 An Act relating to health care cost containment measures and
2 providing for a fee.
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

TL5B 5004SV (1) 84
pf/nh



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 Section 1. Section 505.8, Code Supplement 2011, is amended
2 by adding the following new subsection:

3 NEW SUBSECTION. 6A. The commissioner shall establish
4 a bureau, to be known as the "*health insurance and cost*
5 *containment bureau*", as provided in section 505.20.

6 Sec. 2. NEW SECTION. 505.20 Health insurance and cost
7 containment bureau — advisory board.

8 1. a. The commissioner shall establish a bureau, to be
9 known as the "*health insurance and cost containment bureau*", for
10 the purpose of creating methodologies to hold health carriers
11 accountable for the fair treatment of health care providers and
12 developing affordability standards for health carriers that
13 direct carriers to promote improved accessibility, quality, and
14 affordability of health care.

15 b. The commissioner shall employ professional and clerical
16 staff to carry out the purposes and functions of the bureau.

17 c. The commissioner shall adopt rules under chapter 17A, in
18 collaboration with the health insurance and cost containment
19 advisory board, to administer and implement the purposes and
20 functions of the bureau.

21 2. a. A health insurance and cost containment advisory
22 board is created to assist the commissioner in carrying out
23 the purposes of the bureau. The advisory board shall consist
24 of seven voting members and seven nonvoting members. The
25 voting members shall be appointed by the governor, subject to
26 confirmation by the senate. The governor shall designate one
27 voting member as chairperson and one as vice chairperson.

28 b. The voting members of the advisory board shall be
29 appointed by the governor as follows:

30 (1) Two persons who represent the interests of small
31 business from nominations made to the governor by nationally
32 recognized groups that represent the interests of small
33 business.

34 (2) Two persons who represent the interests of consumers
35 from nominations made to the governor by nationally recognized

LSB 5004SV (1) 84

-1-

pf/nh

1/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 groups that represent the interests of consumers.

2 (3) One person who is an insurance producer licensed under
3 chapter 522B.

4 (4) One person who is a health care actuary or economist
5 with expertise in health insurance.

6 (5) One person who is a health care provider.

7 *c.* The nonvoting members are as follows:

8 (1) The commissioner of insurance or the commissioner's
9 designee.

10 (2) The director of human services or the director's
11 designee.

12 (3) The director of public health or the director's
13 designee.

14 (4) Four members of the general assembly, one appointed
15 by the speaker of the house of representatives, one appointed
16 by the minority leader of the house of representatives,
17 one appointed by the majority leader of the senate, and one
18 appointed by the minority leader of the senate.

19 *d.* Meetings of the advisory board shall be held at the call
20 of the chairperson or upon the request of at least two voting
21 members. Four voting members shall constitute a quorum and the
22 affirmative vote of four voting members shall be necessary for
23 any action taken by the advisory board.

24 *e.* The voting members of the advisory board shall be
25 appointed for staggered terms of three years within sixty days
26 after the effective date of this Act and by December 15 of
27 each year thereafter. The initial terms of the voting members
28 of the advisory board shall be staggered at the discretion
29 of the governor. A voting member of the board is eligible
30 for reappointment. The governor shall fill a vacancy on the
31 board in the same manner as the original appointment for the
32 remainder of the term.

33 *f.* Voting members of the advisory board may be reimbursed
34 from the moneys collected from assessment fees for the
35 administration of the bureau and the advisory board pursuant

LSB 5004SV (1) 84
pf/nh

2/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 to subsection 7, for actual and necessary expenses incurred in
2 the performance of their duties, but shall not be otherwise
3 compensated for their services.

4 *g.* It shall be the duty of the advisory board to assist the
5 bureau in carrying out the purposes and functions of the bureau
6 by making recommendations for the creation of methodologies
7 that hold health carriers in the state accountable for the fair
8 treatment of health care providers and developing affordability
9 standards for health carriers that direct such carriers to
10 promote improved accessibility, quality, and affordability of
11 health care. The advisory board shall also offer input to the
12 commissioner regarding proposed rules, the operation of the
13 bureau, and any other topics relevant to administering and
14 implementing the purposes and functions of the bureau.

15 3. *a.* Health care affordability efforts shall initially
16 focus on the primary care level of care in an effort to create a
17 stronger primary care system and greater supply of more highly
18 compensated primary care providers by targeting more funding to
19 primary care.

20 *b.* Beginning on December 31, 2013, and each year thereafter,
21 each health carrier shall report to the bureau, in a format
22 and including information as required by the commissioner by
23 rule, the carrier's proportion of medical expense paid for
24 primary care for the previous twelve months and the proportion
25 of medical expense to be allocated to primary care for the
26 succeeding twelve months beginning on January 1, 2014, and each
27 year thereafter. The proportion of medical expense paid for
28 primary care shall increase by at least one percentage point
29 per year for five years beginning on January 1, 2014.

30 *c.* Each health carrier shall submit a plan to the bureau
31 each year in a format and including information as required by
32 the commissioner by rule, that demonstrates how the increase in
33 spending for primary care will be accomplished. The increase
34 in spending for primary care shall be accomplished without
35 contributing to an increase in premiums.

LSB 5004SV (1) 84
pf/nh

3/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 4. Each health carrier shall support the implementation
2 of the medical home system as developed and implemented by
3 the department of public health and the medical home system
4 advisory council pursuant to sections 135.157, 135.158, and
5 135.159, by implementing the phase of the medical home system
6 pursuant to section 135.159, subsection 11, that involves
7 insurers and self-insured companies in making the medical
8 home system available to individuals with private health care
9 coverage. The health insurance and cost containment advisory
10 board shall work collaboratively with the medical home system
11 advisory council to implement this phase. In addition to the
12 reimbursement methodologies and incentives for participation
13 in the medical home system described in section 135.159,
14 subsection 8, the advisory board and the medical home system
15 advisory council shall review additional payment and system
16 reforms to support the expanded implementation of the medical
17 home system including but not limited to all of the following:
18 *a.* Rewarding high-quality, low-cost providers.
19 *b.* Creating participant incentives to receive care from
20 high-quality, low-cost providers.
21 *c.* Fostering collaboration among providers to reduce cost
22 shifting from one part of the health care continuum to another.
23 *d.* Creating incentives for providing health care in the
24 least restrictive, most appropriate setting.
25 *e.* Creating incentives to promote diversity in the size,
26 geographic location, and accessibility of practices designated
27 as medical homes throughout the state.
28 5. Each health carrier shall demonstrate by December 31,
29 2013, implementation of incentives consistent with the efforts
30 of the department of public health and the electronic health
31 information advisory council and executive committee pursuant
32 to section 135.156 to promote adoption of electronic health
33 records by health care providers at all levels of the health
34 care continuum. Health carriers shall submit a report to
35 the bureau by December 31, 2014, concerning the incentive

LSB 5004SV (1) 84
pf/nh

4/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 programs that have been implemented in a format and including
2 information as required by the commissioner by rule.

3 6. Each health carrier shall participate in efforts
4 regarding comprehensive delivery system reform, including
5 payment reform, in coordination with other payers and health
6 care providers.

7 a. As an initial step to inform such efforts, the bureau
8 and advisory board shall develop a plan to implement an
9 all-payer claims database by December 31, 2013, to provide
10 for the collection and analysis of claims data from multiple
11 payers of health care delivered at all levels including but not
12 limited to primary care, specialist care, outpatient surgery,
13 inpatient stays, laboratory testing, and pharmacy data. The
14 plan shall provide for development and implementation of a
15 database that complies with any applicable requirements of the
16 federal Act and that most effectively and efficiently provides
17 data to determine health care utilization patterns and rates;
18 identify gaps in prevention and health promotion services;
19 evaluate access to care; assist with benefit design and
20 planning; analyze statewide and local health care expenditures
21 by provider, employer, and geography; inform the development
22 of payment systems for providers; and establish clinical
23 guidelines related to quality, safety, and continuity of care.
24 The bureau shall submit the plan to the general assembly by
25 December 31, 2012, including statutory changes necessary to
26 collect and use such data, a standard means of collecting
27 the data, an implementation and maintenance schedule, and a
28 proposed budget and financing options for the database.

29 b. The bureau and advisory board shall also recommend a
30 provider payment system plan to reform the health care provider
31 payment system beyond primary care providers, including but
32 not limited to specialty care, hospital, and long-term care
33 providers, as an effective way to promote coordination of care,
34 lower costs, and improve quality.

35 7. a. Funding to operate the bureau and the advisory board

LSB 5004SV (1) 84

-5-

pf/nh

5/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 shall come from federal and private grants and from assessment
2 fees charged to health carriers. The commissioner shall charge
3 an assessment fee to all health carriers in this state, as
4 necessary to support the activities and operations of the
5 bureau and the advisory board as provided under this section.
6 No state funding shall be appropriated or allocated for the
7 operation or administration of the bureau or the advisory
8 board. The assessment shall provide for the sharing of bureau
9 and advisory board expenses on an equitable and proportionate
10 basis among health carriers in the state as provided in this
11 subsection.

12 **b.** Following the close of each calendar year, the
13 commissioner shall determine the expenses for operation and
14 administration of the bureau and the advisory board. The
15 expenses incurred shall be assessed by the commissioner to
16 all health carriers in proportion to their respective shares
17 of total health insurance premiums or payments for subscriber
18 contracts received in Iowa during the second preceding calendar
19 year, or with paid losses in the year, coinciding with or
20 ending during the calendar year or on any other equitable basis
21 as provided by rule. In sharing expenses, the commissioner
22 may abate or defer in any part the assessment of a health
23 carrier, if, in the opinion of the commissioner, payment of the
24 assessment would endanger the ability of the health carrier to
25 fulfill its contractual obligations. The commissioner may also
26 provide for an initial or interim assessment against health
27 carriers if necessary to assure the financial capability of
28 the commissioner to meet the incurred or estimated operating
29 expenses of the bureau and the advisory board until the next
30 calendar year is completed.

31 **c.** For purposes of this subsection, "*total health insurance*
32 *premiums*" and "*payments for subscriber contracts*" include,
33 without limitation, premiums or other amounts paid to or
34 received by a health carrier for individual and group health
35 plan care coverage provided under any chapter of the Code or



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 Acts, and *"paid losses"* includes, without limitation, claims
2 paid by a health carrier operating on a self-funded basis for
3 individual and group health plan care coverage provided under
4 any chapter of the Code or Acts. For purposes of calculating
5 and conducting the assessment, the commissioner shall have
6 the express authority to require health carriers to report on
7 an annual basis each health carrier's total health insurance
8 premiums and payments for subscriber contracts and paid losses.
9 A health carrier is liable for its share of the assessment
10 calculated in accordance with this subsection regardless of
11 whether it participates in the individual insurance market.

12 8. The commissioner shall keep an accurate accounting of
13 all activities, receipts, and expenditures of the bureau and
14 advisory board and annually submit to the governor, the general
15 assembly, and the public, a report concerning such accounting.

16 9. The bureau and the advisory board shall coordinate their
17 activities with the Iowa Medicaid enterprise of the department
18 of human services, the department of revenue, the department of
19 public health, and the insurance division of the department of
20 commerce to ensure that the state fulfills the requirements of
21 the federal Act and to ensure that in the event that a health
22 insurance exchange is established in the state, the functions
23 and activities of the bureau and the advisory board can be
24 seamlessly integrated into the exchange.

25 10. As used in this section, unless the context otherwise
26 requires:

27 a. *"Advisory board"* means the health insurance and cost
28 containment advisory board.

29 b. *"Bureau"* means the health insurance and cost containment
30 bureau.

31 c. *"Commissioner"* means the commissioner of insurance.

32 d. *"Federal Act"* means the federal Patient Protection and
33 Affordable Care Act, Pub. L. No. 111-148, as amended by the
34 federal Health Care and Education Reconciliation Act of 2010,
35 Pub. L. No. 111-152, and any amendments thereto, or regulations

LSB 5004SV (1) 84

-7-

pf/nh

7/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 or guidance issued under those Acts.

2 *e. "Health care provider"* means a physician who is licensed
3 under chapter 148, or a person who is licensed as a physician
4 assistant under chapter 148C or as an advanced registered nurse
5 practitioner.

6 *f. "Health carrier"* means an entity subject to the insurance
7 laws and rules of this state, or subject to the jurisdiction
8 of the commissioner, that contracts or offers to contract to
9 provide, deliver, arrange for, pay for, or reimburse any of
10 the costs of health care services, including an insurance
11 company offering sickness and accident plans, a health
12 maintenance organization, a nonprofit hospital or health
13 service corporation, or any other entity providing a plan of
14 health insurance, health benefits, or health services.

15 *g. (1) "Health insurance"* means benefits consisting
16 of health care provided directly, through insurance or
17 reimbursement, or otherwise, and including items and services
18 paid for as health care under a hospital or health service
19 policy or certificate, hospital or health service plan
20 contract, or health maintenance organization contract offered
21 by a carrier.

22 (2) *"Health insurance"* does not include any of the
23 following:

24 (a) Coverage for accident-only or disability income
25 insurance.

26 (b) Coverage issued as a supplement to liability insurance.

27 (c) Liability insurance, including general liability
28 insurance and automobile liability insurance.

29 (d) Workers' compensation or similar insurance.

30 (e) Automobile medical-payment insurance.

31 (f) Credit-only insurance.

32 (g) Coverage for on-site medical clinic care.

33 (h) Other similar insurance coverage, specified in
34 federal regulations, under which benefits for medical care
35 are secondary or incidental to other insurance coverage or

LSB 5004SV (1) 84

pf/nh

8/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 benefits.

2 (3) "*Health insurance*" does not include benefits provided
3 under a separate policy as follows:

4 (a) Limited scope dental or vision benefits.

5 (b) Benefits for long-term care, nursing home care, home
6 health care, or community-based care.

7 (c) Any other similar limited benefits as provided by rule
8 of the commissioner.

9 (4) "*Health insurance*" does not include benefits offered as
10 independent noncoordinated benefits as follows:

11 (a) Coverage only for a specified disease or illness.

12 (b) A hospital indemnity or other fixed indemnity
13 insurance.

14 (5) "*Health insurance*" does not include Medicare
15 supplemental health insurance as defined under section
16 1882(g)(1) of the federal Social Security Act, coverage
17 supplemental to the coverage provided under 10 U.S.C. ch. 55,
18 or similar supplemental coverage provided to coverage under
19 group health insurance coverage.

20 (6) "*Group health insurance coverage*" means health insurance
21 offered in connection with a group health plan.

22 Sec. 3. NEW SECTION. 513B.16 Premium rate increases —
23 public hearing and comment.

24 1. All health insurance carriers licensed to do business
25 in the state under this chapter shall immediately notify the
26 commissioner and policyholders of any proposed rate increase
27 exceeding the average annual health spending growth rate stated
28 in the most recent national health expenditure projection
29 published by the centers for Medicare and Medicaid services of
30 the United States department of health and human services, at
31 least ninety days prior to the effective date of the increase.
32 Such notice shall specify the rate increase proposed that is
33 applicable to each policyholder and shall include ranking and
34 quantification of those factors that are responsible for the
35 amount of the rate increase proposed. The notice shall include

LSB 5004SV (1) 84
pf/nh

9/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 information about how the policyholder can contact the consumer
2 advocate for assistance.

3 2. The commissioner shall hold a public hearing at least
4 thirty days before the proposed rate increase is to take
5 effect.

6 3. The consumer advocate shall solicit public comments on
7 each proposed health insurance rate increase if the increase
8 exceeds the average annual health spending growth rate as
9 provided in subsection 1, and shall post without delay during
10 the normal business hours of the division, all comments
11 received on the insurance division's internet site prior to the
12 effective date of the increase.

13 4. The consumer advocate shall present the public
14 testimony, if any, and public comments received, for
15 consideration by the commissioner prior to the effective date
16 of the increase.

17 EXPLANATION

18 This bill relates to health care cost containment measures.
19 The bill requires the commissioner of insurance to establish
20 a health insurance and cost containment bureau within
21 the insurance division which is responsible for creating
22 methodologies to hold health carriers accountable for the fair
23 treatment of health care providers and developing affordability
24 standards for health insurance carriers that direct carriers
25 to promote improved accessibility, quality, and affordability
26 of health care.

27 A health insurance and cost containment advisory board
28 is also created to assist the commissioner of insurance in
29 carrying out the purposes of the new bureau. The advisory
30 board is comprised of seven voting members appointed by the
31 governor, subject to confirmation by the senate, and seven
32 nonvoting members. The members shall be appointed within 60
33 days after the effective date of the bill. The voting members
34 are to represent small business, consumers, and insurance
35 producers, and shall include a health care actuary or economist

LSB 5004SV (1) 84

-10-

pf/nh

10/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 with expertise in health insurance and a health care provider.
2 The nonvoting members are the commissioner of insurance, the
3 director of human services, and the director of public health,
4 or their designees, and four members of the general assembly
5 appointed by majority and minority leaders in the house of
6 representatives and the senate.

7 Health care affordability efforts must initially focus on
8 primary care to create a stronger primary care system and
9 a greater supply of more highly compensated primary care
10 providers by targeting more funding to primary care. Beginning
11 on December 31, 2013, and each year thereafter, each health
12 insurance carrier in the state is required to report to the
13 bureau the carrier's proportion of medical expense paid for
14 primary care for the previous 12 months and the proportion
15 of medical expense to be allocated to primary care for the
16 succeeding 12 months beginning on January 1, 2014, and each
17 year thereafter. The proportion of medical expense paid for
18 primary care must increase by at least one percentage point
19 per year for five years beginning on January 1, 2014. Health
20 insurance carriers are also required to submit a plan that
21 demonstrates how the increase in spending for primary care
22 will be accomplished without contributing to an increase in
23 premiums.

24 Health insurance carriers are required to support the
25 implementation of the phase of the medical home system as
26 developed and implemented by the department of public health
27 that involves making the medical home system available
28 to individuals with private health care coverage. The
29 advisory board shall collaborate with the medical home
30 system advisory council to implement this phase and to review
31 additional payment and system reforms to support the expanded
32 implementation of the medical home system.

33 Health insurance carriers are required to demonstrate by
34 December 31, 2013, implementation of incentives consistent
35 with the efforts of the department of public health and the

LSB 5004SV (1) 84

-11-

pf/nh

11/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 electronic health information advisory council and executive
2 committee to promote adoption of electronic health records
3 by health care providers at all levels of the health care
4 continuum. Health carriers shall submit a report to the bureau
5 by December 31, 2014, concerning the incentive programs that
6 have been implemented.

7 Health insurance carriers are required to participate in
8 efforts to achieve comprehensive system reform, including
9 payment reform, in coordination with other payers and health
10 care providers. To inform such efforts, the health insurance
11 and cost containment bureau and advisory board shall develop a
12 plan to implement an all-payer claims database by December 31,
13 2013, that provides for the collection and analysis of claims
14 data from multiple payers of health care delivered at all
15 levels. The planned database shall comply with all applicable
16 requirements of the federal Patient Protection and Affordable
17 Care Act. The bureau shall submit the plan to the general
18 assembly by December 31, 2012. The bureau and the advisory
19 board shall also recommend a provider payment system plan to
20 reform the health care provider payment system beyond primary
21 care providers.

22 Funding to operate the new bureau and advisory board shall
23 come from federal and private grants and from assessment fees
24 charged to health insurance carriers as provided in the bill.
25 No state funding shall be appropriated for the operation or
26 administration of the bureau or the advisory board.

27 The commissioner is required to keep an accurate accounting
28 of all activities, receipts, and expenditures of the bureau and
29 advisory board and annually submit a report of such accounting
30 to the governor, the general assembly, and the public.

31 The bureau and the advisory board shall coordinate their
32 activities with the Iowa Medicaid enterprise of the department
33 of human services, the department of revenue, the department
34 of public health, and the insurance division of the department
35 of commerce to ensure that the state fulfills the requirements

LSB 5004SV (1) 84

-12-

pf/nh

12/13



Iowa General Assembly
Daily Bills, Amendments and Study Bills
April 11, 2012

S.F. 2337

1 of the federal Patient Protection and Affordable Care Act and
2 to ensure that in the event a health insurance exchange is
3 established in the state, the functions and activities of the
4 bureau and the advisory board can be seamlessly integrated into
5 the exchange.

6 The bill also requires that all health insurance carriers
7 licensed in the state to provide health insurance to small
8 employers with two to 50 employees must immediately notify
9 the commissioner and policyholders of any proposed rate
10 increase exceeding the average annual health spending growth
11 rate stated in the most recent national health expenditure
12 projection published by the centers for Medicare and Medicaid
13 services of the United States department of health and human
14 services, at least 90 days prior to the effective date of the
15 increase. The notice must specify the rate increase applicable
16 to each policyholder and rank and quantify the factors that are
17 responsible for the amount of the rate increase proposed. The
18 commissioner is required to hold a public hearing at least 30
19 days before a proposed rate increase is to take effect. The
20 consumer advocate must solicit public comments on each proposed
21 small employer health insurance rate increase and post the
22 comments on the insurance division's internet site.